

University of Alberta

"Can You Watch My Section?":

Tobacco Use and Health Promotion for Young Adult Women

Serving in the Hospitality Industry

by

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DEDICATION

This thesis is dedicated to my family, Dr. Michael J. Evans and all our fantastic children.

ABSTRACT

Although policy in Canada aims to prevent tobacco use and second hand smoke exposure inside bars and restaurants, continued tobacco use among their staff has been overlooked. In particular, little is known about how young adult women employed as servers experience issues related to stress, coping, social roles, and tobacco use. To address this knowledge gap, the present study conducted phenomenological analyses of the lived experiences of thirteen young adult women occupied as servers in the hospitality industry (6 smokers and 7 non-smokers). Results indicated that these women not only experience a highly stressful and demanding work environment, but are also vulnerable to developing negative coping strategies linked to tobacco use. A health promotion approach is outlined; aimed at decreasing tobacco use and promoting awareness that, because of age and occupation, these women are double targets for the tobacco industry's promotion of tobacco use as a temporary lifestyle choice.

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TABLE OF CONTENTS

Chapter 1	Introduction, Literature Review and Rationale for this Study	1
	Introduction	1
	Research Questions	2
	Literature Review	2
	Women's Health and Tobacco Use	2
	Prevalence and sociodemographic correlates	2
	Contextual influences on young adult women's tobacco use	3
	Summary	6
	Women's Health and the Stress Process	7
	Stress, socioeconomic status and social roles	7
	Social support and coping	10
	Summary	12
	Women's Health and Work	12
	Theoretical approaches	12
	Shift work and emotional labour	15
	Service workers	17
	Providing hospitality	18
	Occupational community	19
	Summary	20
	Conclusion	21
	Rationale for this study	22
	Research Questions	22
Chapter 2	Methods	24
	Overview of Approach	24
	Using phenomenology to explore women's health	25
	Strengths of phenomenological inquiry	25
	Limitations of phenomenological inquiry	26
	Ethics	27
	Overview of Procedures	27
	Participants and Recruitment	27
	Data Collection Procedures	28
	Data Analysis	30
	Stage 1: Description	31
	Stage 2: Code identification	32
	Stage 3: Themes	33
	Stage 4: Presentation	36
	Trustworthiness of Results	36
	Validity	36
	Reliability	37
Chapter 3	Results	38
	Overview of Participants and Themes	38
	Description of study participants	38

	Description of thematic results	39
	Category:	
	Workplace Characteristics	41
	Occupational Community	50
	Social Roles	56
	Stress	58
	Context of Tobacco use	63
	Tobacco Control.....	72
	Life Transitions.....	77
	Summary	81
Chapter 4	Discussion 82	
	Social and Environmental Context of Young Adult Women in the	
	Hospitality Industry	83
	Workplace characteristics	83
	Occupational community	84
	Social roles.....	86
	Stress	87
	The Relationship between Young Adult Women's Environment and	
	Tobacco Use	88
	Context of tobacco use.....	88
	Work/life balance: Temporary lifestyles and tobacco	90
	Significance of Research.....	92
	Implications for Health Promotion	93
	Strengths of Study.....	95
	Limitations of Study	95
	Future Research Directions.....	96
	Conclusion	97
	References	98
	Appendices	
	Appendix A: Recruitment Aid	108
	Appendix B: Participant Information Letter	109
	Appendix C: Participant Informed Consent.....	110
	Appendix D: Demographics sheet	111
	Appendix E: Semi-structured Interview Guide.....	113

LIST OF TABLES

Table 1: Stage 1 of Analysis	32
Table 2: Stage 2 of Analysis	33
Table 3: Stage 3 of Analysis	35
Table 4: Demographics	39
Table 5: Outline of Themes	40

Chapter 1 Introduction, Literature Review, and Rationale for the Study

Introduction

Health promotion not only is about health education and interventions aimed at the general public, but also involves descriptive and exploratory research within population subgroups. This chapter presents a review of literature which suggests that young adult women employed in the hospitality industry not only represent a distinctly important population subgroup, but also could potentially benefit from focused health promotion initiatives. Findings from the literature are presented as follows: Initially, current research on women's tobacco use is summarized; then, research on women's health is reviewed, with a specific focus on social roles, stress and coping processes, and the influences of women's work on health; finally, I characterize the specific target population for this study, that is, young adult women employed in the hospitality industry as servers: an occupational role often characterized by shift work, high demand, high stress, and low control.

Servers are disproportionately young adult women. Developmentally, this age group is attaining new freedoms and obligations such as employment, higher education, reproduction and child rearing (McDermott, Dobson & Owen, 2006). Despite evidence that there are high smoking rates among people employed in service occupations (Smith & Leggat, 2007) very little is known about the lived experiences of women in this target population, and how tobacco use behaviour, social roles and occupational characteristics are interrelated. I argue that systematic description of social roles, related role obligations, occupational characteristics and associations with tobacco use could assist in

the development of health promotion initiatives and healthy public policy aimed at improving the health of these women and their families.

In the remaining chapters of this thesis, an exploration of the lived experiences of women occupied in the hospitality industry is described. Specifically, phenomenological analysis of semi-structured interviews with thirteen women was conducted to address the following research questions:

1. What are women's perspectives of serving in the hospitality industry?
2. How do women who serve perceive serving in relation to their health and social roles (i.e., parent, partner, university student, and employee)?
3. How do women who serve describe stress? Do they associate stress with their roles?
4. How do women who serve describe tobacco use in the hospitality industry?
5. Do women who serve associate stress or social roles with tobacco use?

Literature Review

Women's Health and Tobacco Use

Prevalence and sociodemographic correlates. As of December 2006, the Canadian Tobacco Use Monitoring Survey (CTUMS) indicate 15.5 % of women in Canada were current smokers¹ and 11.8% were daily smokers² (2006). Kirkland, Greaves and Devichand (2004) reported that, overall, Canadian women have a slightly lower smoking prevalence than men. However, as a subgroup, young women (i.e., those under 35 years of age) have a higher prevalence of tobacco use compared to men and women

¹ Includes daily smokers and non-daily smokers (also known as occasional smokers). Determined from the response "At the present time do you smoke cigarettes every day, occasionally or not at all?" (CTUMS, 2006).

² Refers to those who responded "every day" to the question "At the present time, do you smoke cigarettes every day, occasionally or not at all?" (CTUMS, 2006).

overall. Kirkland and colleagues also reported that more Canadian women transitioning to young adulthood (34%) are current smokers, compared to the entire population of Canadian women (26.4%). Similarly, CTUMS (2006) indicated that more young adult women (i.e., aged of 18-34) are current smokers (20.2%) compared with the next age cohort of women (i.e., 35-44 year olds; 17.7%). With respect to education, smoking rates were higher among women with only a high school diploma or less (31%) compared to women who have completed university (21%; Kirkland, et al.). Finally, more low-income women (34%) were current smokers compared to women with upper and mid-range income (27%; Kirkland, et al.).

These elevated rates of tobacco use among younger, less-educated, and low-income women are alarming, because tobacco use adversely affects a wide range of women's health outcomes. These health issues include cancer (e.g., cancers of the breast, cervix, kidney, bladder, mouth/pharynx, esophagus, kidney lung and pancreas), cardiovascular disease, stroke, hip fracture, pulmonary disease (i.e., bronchitis, asthma and emphysema), menopause, and osteoporosis (Ernster, Kaufman, Nichter, Sarnet & Yoon, 2000; Seltzer, 2003; Chen, Dales, Krewski & Breithaupt, 1999). Women aged 18-34 also experience specific tobacco-related problems in relation to reproductive health, including pregnancy outcomes (e.g., placenta previa, preterm delivery, and stillborn infant) and health of the child (lower birth weight infant, developmental problems; see Seltzer; Stein, 1996; Ernster, et al.).

Contextual influences on young adult women's tobacco use. Based on these associations between women's socio-demographic characteristics and smoking prevalence, Kirkland and colleagues (2004) recommended that women's occupations and

employment status, including issues related to paid and unpaid work, need to be examined in order to better understand contextual influences on smoking and health outcomes for women. From a developmental perspective, these contextual influences arise through the life transition to young adulthood, a period defined by new freedoms, rights, responsibilities and pressures. There is good evidence that this life stage is a vulnerable period for the development and maintenance of a variety of health risk behaviours, including tobacco use (West, Sweeting & Ecob, 1999; McDermott, et al., 2006). McDermott et al. report that between leaving the parental home and starting their own family, young adult women use tobacco as a method to facilitate social bonding in social settings, such as those at school or work. Contextual influences on tobacco use also extend to the study environment for those attending university or college (McDermott et al.).

Colder et al. (2006) reported an interesting trajectory of smoking prevalence among young adults in college, with smoking rates increasing on Fridays and Saturdays and tapering off during week days. Social factors, partying, drinking, and new freedoms and exploration were associated with students' smoking patterns. Stressors during the college experience (e.g., academic demands, new freedom and social interactions) are the primary reasons reported for tobacco use, often in conjunction with alcohol consumption (Gaffney, Wichaikhum & Dawson, 2002; Jones, Harel & Levinson, 1992). In this respect, young adult women can be considered targets of the tobacco industry, since elevated smoking rates among young adults have been associated with marketing strategies in campus bars and clubs (Ling & Glanz, 2002; Sepe, Ling, & Glanz, 2002; Katz & Lavack, 2002; Gilpin, White & Pierce, 2005). Gilpin et al. contend that all young adults, aged 18-

29, are at risk for tobacco use until transition to family life and/or careers have been made.

Young adult men and women often hold jobs during their high school and college/university years. Statistics Canada (2007) reported that in May 2007, 47.2% of students aged 15-24 years and 62.4% of students aged 20-24 were employed. Singularly or in combination, college/university attendance and employment may be a common context facilitating tobacco use for young adult women. This is significant, as entering the work force is instrumental in the maintenance of tobacco use. The amount smoked appears to be dependent on how conducive the work environment is to smoking, including opportunities to have cigarette breaks and engage in social bonding with other smokers (McDermott et al., 2006; Johansson, Johnson & Hall, 1991). For example, McCurdy, Sunyer, Anto and Kogevinas (2003) described higher levels of tobacco use in "blue collar" workers compared with "white collar" workers in studies conducted in the United States.

Smith and Leggat (2007) describe results from the Australian National Health Survey indicating that for the Australian hospitality industry men (44.7%) and women (38.9%) in food tradesperson occupations (e.g., kitchen cook/prep) and men (32.1%) and women (27.6%) in service occupations (e.g., food and beverage server) are current smokers. Smoking prevalence is high in these groups, especially when taking into consideration that 116,574 men and 455,036 women hold jobs in the server occupation category in Australia. By job category, labourers and servicepersons, in general have a higher smoking prevalence compared with those in professional, managerial positions (Smith and Leggat). These results suggest increased risk for tobacco use among particular

occupations in Canada, specifically in the hospitality industry; however, no epidemiological data are available in relation to this type of work at this time.

Job characteristics and work organization (e.g., control over work pace, physical and psychological demands, job complexity, social interaction, and work schedule) have all been associated with smoking behaviour (Johansson, et al., 1991). Workers may use smoking to cope with the occupational stress of high job demands and strain. Types of work schedules, most often shift work, are associated with a combination of both high stress and high tobacco use (Sorenson, Barbeau, Hunt & Emmons, 2004; Johansson et al.; Knutsson & Nilsson, 1998). For example, night workers tend to use smoking to combat sleep and cope with work tasks, job strain, or job dissatisfaction (Knutsson & Nilsson, 1998). Johnson & Hall (1996) found that women's jobs in particular, especially in a shift work or night work context, provide opportunities for social interaction during breaks that revolve around socializing and smoking behaviour. This is an interesting finding, since social interactions are typically characterized as a resource that should decrease adverse negative health behaviours (Johansson et al.).

Summary. Tobacco use is common for young adult women (i.e., aged 18-34 years) (Kirkland, et al., 2004; CTUMS, 2006). Researchers focusing on women's life transitions from adolescence to young adulthood find associations between new freedoms, new friendships, initiation of higher education and/or employment and the introduction and maintenance of tobacco use. This life stage is important when considering that women typically have, or start having families during this period and their health behaviour will influence health outcomes for themselves and their family. Occupations, such as "blue collar" jobs in the hospitality industry, are associated with

higher rates of tobacco use. For example, shift work is associated with occupational stress due to physical and mental job demands and atypical work hours. Life transitions and occupation for young adult women may increase risk for tobacco use associated with stressors and socializing found in both their study and work environment.

Women's Health and the Stress Process

A better understanding of stress and coping strategies may help to further describe the contextual influences on tobacco use in this group and it is important to consider the influences on young adult women's health from a perspective that includes stress, socioeconomic status, and social roles.

Stress, socioeconomic status and social roles. Stress is one of the most common health problems perceived by women (Messing, 1998; Shields, 2004; Williams & Kurina, 2002). The stress process refers to a socially patterned phenomenon where stressful experiences and the resources to counteract them are distributed in society in ways that are linked to structural inequalities (McDonough, Walters & Strohschein, 2002). In the same way that there are robust inverse relationships between socio-demographic factors and tobacco use, researchers suggest that chronic stress is inversely associated with social position. Thus, individuals from lower status groups (e.g., low education, low or underemployment) and vulnerable groups (e.g., Aboriginal peoples, single mothers, disabled peoples, the young and seniors) potentially experience more ongoing, chronic stress than other groups more economically and educationally advantaged (McDonough et al.). For example, university students, as a group, are vulnerable to experiencing stress resulting from changes in lifestyle, moving to a new location and increased responsibility (McDermott et al., 2006)

Pearlin, Mullan, Semple and Skaff (1990) proposed that interrelated levels of social structure, including social stratification, social institutions, and interpersonal relationships, shape the experiences of individuals and these experiences, in turn, may produce stress and coping responses that are harmful to health. This *social stress model*, presented by Pearlin et al. conceptualizes stress as a state of emotional or physiological arousal that occurs when demands from the environment overwhelm the ability of an individual to adapt (Williams & Kurina, 2002). Social stressors are defined as the demands made on an individual by factors in their environment, including time demands, physical demands and psychological demands (Stellman & Stellman, 1995). Constant exposure to social stress over a period of time can negatively influence physical and mental health.

In an attempt to cope with stress, an individual may utilize negative health behaviours such as tobacco use (Williams & Kurina, 2002; Stellman & Stellman, 1995). Perceived ability to cope with stress is in turn influenced by an individual's available social and personal resources (Williams & Kurina). Thus, interpersonal relationships and a sense of personal control over one's environment influence vulnerability to stress (Williams & Kurina). This social stress model suggests women's health risks result from social-environmental factors that influence the type of stressors women are exposed to (Williams & Kurina). Work and family roles and family structure are examples of factors associated with stress that plays a role in women's health and well-being (Williams & Kurina).

An outcome of social-environmental factors, low socioeconomic status, is a common experience for many vulnerable groups (e.g., Aboriginal peoples, single women,

the disabled, the young and the elderly) and considered a significant contributor to chronic stress (Mead, Witkowski, Gault & Hartmann, 2001). The lack of material, personal and social resources makes it difficult to cope with ongoing strains and results in negative health outcomes (McDonough et al., 2002). For women, having any combination of low income, low education and low or underemployment is associated with poorer perceptions of health status, heightened levels of stress and depressive symptoms, and an increased likelihood of smoking (Bernstein, 2001; Williams & Kurina, 2002).

Low income is linked to women's occupation and subsequent earnings (on average 71% of men's), placing them at considerable risk for stress (Williams & Kurina, 2002). One typical low-income job that many women take up is employment in the service sector. Most positions in this category involve low autonomy and high routine, both of which are associated with increased job strain and psychological distress (Williams & Kurina). Reporting on Canadian workers, Shields (2006), describes an inverse relationship between job stress and job satisfaction levels. Workers with low levels of job satisfaction also report decreased physical and mental health (Shields, 2006). Canadian women, overall, reported higher levels of work-related stress compared to men. As a subgroup, women aged 15-24 reported higher work-related stress (i.e., ratings of their work as being 'quite a bit stressful' or 'extremely stressful') compared to men of the same age group and all Canadian workers overall (CCHS, 2001; Shields, 2005).

With regard to women in general, but in particular young adult women, work can involve significant caring for others while working with the public (Sprout & Yassi, 1995). This form of labour, termed *people-work*, (Brotheridge & Grandey, 2002, p.17;

Mann, 2004, p.205) represents types of work, both unpaid (e.g., family caregivers) and paid (e.g., nurses, food and beverage servers, flight attendants) with a heavy emphasis on interaction with people (Maslach & Jackson, 1981). *People-work* consistently places others' needs before a worker's own and can result in emotional exhaustion, employee burnout, psychological distress, risky health behaviours and poor health outcomes (Williams & Kurina, 2002; Sprout & Yassi, 1995).

To fully understand the complexities of people-work, it is necessary to be aware of the social roles women hold that are associated with caring for others, as paid and unpaid workers (e.g., mothers, caregivers, household providers and partners). The quality and quantity of these roles are associated with exposure to social stresses that can lead to positive and/or negative health outcomes. At increased risk are subgroups, such as low income women, who experience stress due to economic pressures and emotional demands of caring for others (Sorensen, et al., 2004; Chen, et al., 1999). In her research on women and occupational health, Messing (1998) found that when women have unsatisfactory work environments (e.g., inadequate job compensation, working conditions and health benefit coverage) they report high levels of stress when trying to maintain their paid and unpaid work roles (Messing; Messing & de Grosbois, 2001). It may be that people-work, as a form of employment, especially when in conjunction with unpaid roles, increases the levels of stress experienced by women. To counteract this negative outcome of stress, social support from others is a common coping technique.

Social support and coping. Inequalities and disparities among gender and income groups create a burden of psychosocial, functional and health risks that are best understood from the perspective of social capital (Moss, 2002). Social capital is defined

as an individual's available social resources or social supports, including available kin and community ties and social networks (Wilkinson, 1996; Moss). So defined, social capital is a buffer and positive coping strategy for reducing stress, decreasing negative health behaviours and promoting women's health and well-being. Hochschild (1989) proposed that a woman's family or social support outlet may become those she spends the most time with, and thus, in the case of employment, fellow employees may become a woman's strongest social ties. Moss states that the effects of social ties and support depend on a variety of factors associated with socioeconomic status, including age, occupational position and role, job control, and residence in urban or rural settings. The number and quality of a woman's roles in the workforce influences her ability to gain and maintain these social ties (Moss). Graham (1994) suggests women with lower socioeconomic status tend to lack the social support needed to provide effective strategies to cope with ongoing stressors.

Women's social support and reactions to stress are important influences on smoking rates and success in quitting (Secker-Walker, Flynn, Solomon & Vacek, 1996). Although women find social support generally helpful, supportive interventions developed especially for smoking cessation have not been very successful, possibly because women with multiple roles have less opportunity or time to engage in smoking cessation programs (Stellman & Stellman, 1995; Milham & Davis, 1991). Women appear to be better able to quit in a nonsmoking environment and are more responsive to the current smoking status of others around them (i.e., spouse/partner, family and friends and coworkers; see Johnson & Hall, 1996). In addition, Westmaas, Wild and Ferrence (2002) found that controlling social influences (e.g., nagging) from the immediate social network

(i.e., spouses/partners, family members, and friends) are less effective in helping women reduce smoking, compared to men. Sorensen et al., (2004) conclude that women's smoking exists in a social network at work influenced by the strains presented by balancing multiple roles at home and work, smoking behaviour of friends and available social resources.

Summary. Stress is a common health issue among women (Williams & Kurina, 2002; Messing 1998). Stressful life experiences and the resources to cope with them are linked to structural inequalities in society. Socioeconomic status, employment characteristics and balancing social roles are all associated with stress (Williams & Kurina). Social support is understood to be quite valuable to cope with stress, providing a buffer to combat negative health behaviours and outcomes (e.g., emotional, mental, physical support from social ties) (Wilkinson, 1996; Moss, 2002). However, women employed in stressful, low-income occupations may be limited in their ability to either have social support or use it to cope in a positive manner. The associations between multiple social roles, stress and the use of tobacco as a coping strategy are not yet clearly understood. It is important to further examine the interrelation between women's social roles and implications for their health.

Women's Health and Work

Theoretical approaches. Two main theoretical approaches, based mainly on studies of men, traditionally have been used to understand the relationship between multiple role occupancy and health (Janzen & Muhajarine, 2003). *Role overload theory* describes human energy as a limited commodity in which the more roles a person occupies the more strain will be experienced and the greater the likelihood of negative

effects on health and well-being (Goode, 1960, cited in Janzen & Muhajarine). In contrast, the *role enhancement model* presents the potential and psychological health benefits of occupying parent, partner and paid worker roles and proposes health enrichment as a result of simultaneous participation in these roles (Sieber, 1974, cited in Janzen & Muhajarine). Most research supports the role enhancement model – contrary to common assumptions that increasing roles should be associated with increasing strain and work/role overload (Hibbard & Pope, 1991; Janzen & Muhajarine).

Recent research on women's employment status and role obligations has attempted to understand how women's roles may influence their life experience and health. Being employed has been associated with increased health for all women: married or single, with or without children (Janzen & Muhajarine, 2003). However, research suggests that work overload is often experienced as a result of multiple work or role responsibilities, such as child care, household maintenance, paid work and attendance at university/college (Sprout & Yassi, 1995). One's ability to balance multiple roles may depend on three important factors: gender, income adequacy and socioeconomic status. For example, lower socioeconomic status, as a result of decreased financial and social resources, is associated with increased exposure to household and childcare strains and demands (Janzen & Muhajarine). Women's social roles influence exposure to high demands on time, energy and mental resources can result in increased stress and decreased health status (Williams & Kurina, 2002; Janzen & Muhajarine; Loscocco & Spitze, 1990; Sprout & Yassi, 1995). CCHS³ (2001) data suggest young adult women (i.e., aged 18-24, 26.1% and 18-34, 27.7%) report more life stress (i.e., "quite a lot"

³The Canadian Community Health Survey conducted in 2001 by Statistics Canada. CCHS provides cross-sectional estimates of health determinants, health status and health utilization across Canada.

category) than young men (i.e., aged 18-24 19.5%; 18-34, 23.9%). Women in this cohort often have many social roles, and that may explain their perceptions of increased life stress. Women in this age group, thus, could be experiencing decreased health status as a result.

These findings support a third theoretical perspective which includes the interplay of women's roles and health: the *role integration model*. In contrast to role overload theory and the role enhancement model, the role integration model does not predict the direction of the effect of work on health but instead considers health effects depending on the *balance* between role satisfaction and role stress within and between women's multiple roles (Hilfinger Messias, et al., 1997). In this approach, a positive balance between role satisfaction and role stress indicates a sense of coherence and balance that will increase the sense of well-being (Hilfinger Messias et al.). Studies using this model ask women to reflect on their stress and satisfaction in their roles (Hilfinger Messias et al.). Janzen & Muhajarine (2003) reflect other researchers' conclusions in that the previous research designs have not adequately evaluated the possibility of alternative explanations when observing social role-health status associations. Instead of focusing on a specific social role or combinations of social roles for positive and negative outcomes for all men and women, research needs to qualitatively examine the contextual factors of the relationship between gender, social roles and health status (Messing, 1998).

To further support the role integration model, Hilfinger Messias and colleagues (1997), in their study of women's work, found that women report a wide range of complex descriptions regarding their work and family roles that were more diverse than a simple report of stress or satisfaction. When given the opportunity, women often voice a

combination of feelings of powerlessness, empowerment, worry, disconnectedness, resignation, overload, recognition, being valued/devalued, being needed and useful, being supported, receiving approval, making others happy and comfortable, having fun, participating and interaction with others (Hilfinger Messias et al.). In addition, Loscocco and Spitze (1990) suggest that although both genders experience similar distress from certain working conditions, different types of employment occupied by a particular gender may better explain overall differences in experiences of health and well-being. Thus, as an approach to understanding occupational health and wellness, the role integration model is valuable as long as gender is considered when attempting to understand women's positions within their paid and unpaid working conditions (Loscocco & Spitze). Keeping in mind the role integration model, it is important to understand how characteristics of typical women's paid work balance with multiple social roles. A common occupation characteristic found in women's paid work is shift work.

Shift work and emotional labour. Shift work is defined as working non-standard hours, including evening, rotating, irregular or split shifts (e.g., 2 or 3 shifts in a 24 hour period). For example, service occupations most often schedule shift work for their employees, a range of shifts in one week scheduled outside of the regular daytime work week. The 2001 CCHS indicated that 40% of men and 41% of women were occupied in the sales/service industry working shifts (Shields, 2002). Many Canadian shift workers have childcare responsibilities: 38% have children under twelve at home and of those, 35% are single (i.e., never or previously married). Single workers are also more likely

than those married to engage in shift work (Shields, 2002). Women, more often than men, report working shifts while attending school and/or caring for the family (Shields, 2002).

Shift work can have positive influences on health. The ability to have control over aspects of shift work can decrease health risks directly and indirectly for high blood pressure, self reported anxiety and depressive symptoms (Fenwick & Tausig, 2001). Autonomy over the number and scheduling of hours worked is associated with increased employee health status. Hattery (2001) reports that non-overlapping shift work provides an opportunity for increased child care by the father and positive feelings of "being a good parent" by the mother (i.e., women doing shift work so that the children did not have to be in daycare). Despite these potentially positive influences, shift work is also associated with negative effects such as social, family and marital problems and psychological fatigue and stress (Morehouse, 1995). Three possibly interrelated risks and reactions associated with health issues and shift work are: disruption in circadian rhythms, adoption or escalation of health risk behaviours and increased stress (Shields, 2002). Shift work is often associated with increased tobacco use (Shields, 2002; Knutsson, 2003; Fenwick & Tausig; Fagan, 2001).

One characteristic of occupations with shift work and people-work is *emotional labour*, defined as the management of personal feelings in order to create a publicly observable face and body display for a wage (Messing, 1998; Hochschild, 1983). This involves displaying socially desirable emotions in the context of an interpersonal interaction expected when a worker is providing a service to another individual or client (Hochschild, 1983; Brotheridge & Lee, 2002; Hall, 1993). High levels of emotional

labour are found in the service industry (e.g., cashier, gas attendant), hospitality industry (e.g., server, bartender, hostess) and health care industry (e.g., nurse, hospital care aide).

Mann (2004) describes the three components of emotional labour as: faking emotions that are not felt (e.g., enthusiasm); hiding emotions that are felt (e.g., resentment); and managing emotions to meet requirements of the job. Hochschild (1983) describes two similar performance techniques of emotional labour: *surface acting* (i.e., conforming to required appearance by simulating emotions that are not actually felt) and *deep acting* (attempting to actually experience or feel the emotions that are required to show). Surface acting involves careful presentation of verbal and non-verbal cues (e.g., manipulation of facial expression, gestures and voice tone; Mann). Deep acting involves active attempts to induce the feelings of the desired persona (Mann). As an example, service workers in the hospitality industry, attempt to cope with emotional labour demands by conserving their resources by performing either surface acting (initially) or deep acting (through habituation; Bayard de Volvo, 2003).

Service workers. The majority of employees engaged in service occupations conducting emotional labour in shift work are women (Messing, 1998). There is an enjoyment in *people-work* or caring for others that service workers focus on when describing the positive aspects of their occupation (Messing). However, the emotional demands on service workers are significant; responding to a client's every need, emotion and behaviour while remaining calm and smiling is a difficult task (Messing). Service workers experience conflicts when forcing themselves to appear outwardly "friendly" with customers, especially to customers who are difficult to please or communicate with (Hall, 1993).

Service workers are prone to emotional exhaustion and depersonalization because they do not receive adequate return of emotion or reciprocation from their customers (Brotheridge & Lee, 2002). In a study of service work, Erickson and Wharton (1997) found control over work had a significant inverse relationship on the experience of job-related inauthenticity or inauthentic emotions expressed by service workers when interacting with the public. The more perceived control a service worker felt over the emotional labour in their occupation the less likely they experienced work as inauthentic (Erickson & Wharton). Steinberg and Figart (1999) state emotional labour, in both unpaid and paid work, can influence the overall health and well-being of service workers. People-work occupations with emphasis on emotional labour have important health and social consequences for workers, their families and workplace in general (Steinberg & Figart).

Providing hospitality. The food and beverage server occupation structured by the hospitality industry as both dependent employment and independent contract is an excellent example of service works engaging in emotionally taxing labour (Butler & Skipper, 1983; Paules, 1996). About 90% of food and beverage server positions (from now termed servers) in this industry are occupied by women (Butler & Skipper; Messing, 1998). In Canada, as a dependent worker, a server is typically paid minimum wage, is almost always employed on a part-time basis, and rarely receives any benefits (i.e., medical, dental, pension, and/or maternity benefits) or belongs to a union (Butler & Skipper). As an independent contractor, a server sells his or her services to restaurant, bar or casino customers and the ability to sell, provide service and perform emotional labour is reflected in the tips or gratuity provided by the customers (Butler & Skipper; Paules;

Bayard de Volvo, 2003). The employment status of a server is transient, shifting from restaurant to restaurant, performing the same skills, working the same hours and receiving relatively the same wage (Ali & Avison, 1997). For workers in face to face service occupations such as this, the context itself requires a great deal of emotional labour (Hochschild, 1983).

Butler and Skipper (1983) report a variety of work-related issues for restaurant servers, including homogeneity of past jobs and frequency of job change. The majority of female servers in their study had been in their current job less than one year and reported their previous job as also serving. To remain competitive and support their business, Ali & Avison (1997) state that employers in the hospitality industry transfer the burden of day to day uncertainty of the work flow onto their employees. The expendability of workers in the hospitality industry requires workers to stay late or take additional shifts to cover busy times and leave early when business slows (Ali & Avison). Server positions have high turnover rates and servers usually do not hold loyalties to restaurants because the rewards are low and job dissatisfaction is high (Butler & Skipper). Serving may seem an arduous job, however Bayard de Volvo (2003) found that, at least for one subgroup of 20 to 30 year old cocktail workers, serving is one of the most lucrative options available for entry-level, low-skill work. Sandiford & Seymore (2007) suggest the unique nature of this work instigates the need to understand the hospitality industry and servers as an occupational community, i.e., a unique occupational community with significant issues managing work-life balance.

Occupational community. An occupational community consists of people who are members of the same occupation, have a common sort of life experience and are, to a

degree, separate from the general public or society (Salaman, 1974). Salaman further describes members of an occupational community as those whose work role and life become central to their self image and prefer to associate with, and make friends with only members of their occupation rather than those outside of their workplace.

Marginality is the key to the development of an occupational community and relates to the idea that members believe they are misunderstood or undervalued by those outside their group (Van Maanen and Barley, 1984).

Some research has found servers to have high levels of job satisfaction despite what would be expected due to the competitive and fast paced work environment with low pay and skill (Sandiford & Seymore, 2007). For this reason, it may be the occupational community itself that helps workers cope with their occupation and increases job satisfaction. Sandiford & Seymore describe two features that may underlie this phenomenon. First, service workers perform emotional labour, and thus the intense emotionality of the work may facilitate a sense of community among workers. Second, being employed to enhance clients' leisure activities - typically during unsocial hours - may contribute to a sense of convergence of work and non-work activities. Servers, predominantly women, thus represent a unique occupational community that may provide interesting perspectives on women's health and the relationships between occupation, social roles, stress and tobacco use.

Summary. Women's health is strongly intertwined with their employment and multiple social roles, creating a complex situation in which they face a number of challenges. Shift work and people-work are excellent examples of the factors associated with positive and negative outcomes when women try to maintain work-life balance.

Emotional labour is a well researched outcome for those that provide service and is associated with increased perceptions of stress and burden. Women working in the hospitality industry as servers, are an excellent example of a subgroup that performs tasks focused on *people-work* and associated with increased emotional labour. Coping strategies for such women often include social support and negative health behaviours, of which, tobacco use is predominant.

Conclusion

This chapter reviewed research and theory on women's health in relation to tobacco use, stress and coping processes, and the varied work characteristics and role obligations facing young adult women (i.e., those defined as young adult women aged between the ages of 18 and 34 years). This age group experiences life transitions associated with young adulthood, including development of self identity, experimentation, and the initial stresses and expectations of taking on multiple social roles. The literature review suggests that maintaining a work-life balance may be difficult and the extent of woman's multiple social roles may influence their health behaviours and subsequent health outcomes. Role integration theory provides a plausible account of the interaction between women's health and social roles and suggests that the type of employment held may influence health (Hilfinger Messias et al., 1997). For example, shift work, typically with high expectations for emotional labour, is associated with increased stress and negative health behaviours (i.e., tobacco and alcohol use; Johansson et al., 1991). One common type of shift work is serving, a form of *people-work*, found in the hospitality industry, a position characterized as a high demand and low control. Servers are typically young adult women occupying their position while maintaining

multiple social roles, which may make them particularly vulnerable to stress-related tobacco use and other health risk behaviours. Servers may have occupational communities that impact their abilities to cope with the negative aspects of their position.

Rationale for the Study

Current research on the determinants of women's health in a Canadian context emphasizes the need for targeted research with subgroups (Morrow & Hankivsky, 2007). Research reviewed in this chapter suggests that young adult women employed in the hospitality industry are an excellent population subgroup for targeted health promotion research. This thesis was designed to address gaps in knowledge identified earlier, and to take a qualitative approach to research on women's health, work-life balance, stress and tobacco use. The study ultimately is intended to contribute to our understanding of women's occupational health with a view toward facilitating health research and policy changes designed for vulnerable groups (Messing, 1998; Messing & de Grosbois, 2001). Health promotion with subgroups can contribute to health promotion approaches targeted specifically for their needs. Without the initial steps of contextually describing and exploring the lived experiences of these important population subgroups, targeted health promotion approaches cannot be developed and utilized. Consequently, this study is designed to bring attention to a subgroup of women who are not typically studied or included adequately in health research or health promotion initiatives.

Research Questions

The research questions guiding this study were:

1. What are women's perspectives of serving in the hospitality industry?

2. How do women who serve perceive serving in relation to their health and social roles (i.e., parent, partner, university student, and employee)?
3. How do women who serve describe stress? Do they associate stress with their roles?
4. How do women who serve describe tobacco use in the hospitality industry?
5. Do women who serve associate stress or social roles with tobacco use?

Chapter 2 Methods

Overview of Approach

In this study, I adopted a phenomenological approach to answer the research questions outlined in the previous chapter. Phenomenology is the scholarly tradition underlying many philosophical movements, including existentialism, post structuralism, postmodernism, feminism, and cultural critique (van Manen, 1997). Phenomenological studies attempt to describe the meaning of a specific concept, topic, or phenomenon of interest from the perspective of the individuals involved (Creswell, 1998). An individual's lived experience is empirically described using techniques such as interviews, observations, language analysis, fictional accounts, and artistic media (van Manen). In health sciences research, participants express their lived experiences as they relate to their perceptions of health, and researchers, in turn, focus on understanding the meaning of these experiences (Lindseth & Norberg, 2004). Through interviews, participants report actions, attitudes, social relations and other experiences. Researchers systematically analyze these open-ended accounts to describe the essence of the phenomenon under study (Lindseth & Norberg).

The phenomenological perspective assumes that in an interview, what participants describe holds significance for them and represents their relationship between what they are saying and their actual beliefs and constructs within the social context of the interview (Smith, 1995; Giorgi, 1995). As one application of phenomenological perspective, Giorgi (1997) promotes the psychological method, derived from Husserl's philosophical system with extensions to Merleau-Ponty's existential orientation to phenomenology. Following this theoretical perspective, Giorgi's *procedure of method*

and Smith's *interpretative phenomenological analysis* (IPA) are both structured and reflective approaches to understanding the content and complexity of participants' beliefs and constructs in relation their social environment (Smith).

Using phenomenology to explore women's health. Garko (1999) endorses empirical phenomenology, such as the approach presented by Giorgi (1997), as well-suited to represent women's lived experiences. The main reason is that the participant and the researcher have a reciprocal influence and engage in a mutual exchange of knowledge and experience (Garko). Smith & Eatough (2006) describe interpretative phenomenological analysis (IPA) as a similar approach to Giorgi; a structured approach that provides an opportunity for an intensive study of each participant, and to develop insights into a group or community pertaining to the topic of study, and one which is excellent for health research. IPA is the chosen framework for the data analysis of this study due to the usefulness for analysing the in-depth perspectives of small groups of women in the context of their health experience.

Strengths of phenomenological inquiry. Caelli (2001) suggests that the main strength of phenomenology is the voice given to the participants. In this method, the researcher transcribes interviews verbatim and then constructs a narrative story summarizing each participant's lived experiences. Constructed stories are then shared with the participants so that they can see their own words and read their experiences as a structured story. Confidence in the perception of the data is reached if the participant responds that the story is an accurate description. This procedure highlights two advantages of phenomenology. First, describing unique lived experiences gives voice to participants. Second, rigor is maintained by the process of clarifying data with the

participant. Qualitative research informed by phenomenology typically focuses on in-depth interviews with a small number of non-randomized participants typically gathered by snowball or opportunistic sampling (Whitehead, 2004). Finally, semi-structured interviews with a phenomenological approach allow flexibility and opportunity for dialogue that can provide a detailed picture of the participant's perspectives on a particular topic or issue (Smith, 1995).

Limitations of phenomenological inquiry. As a qualitative approach, there are challenges in conducting phenomenological inquiry (Creswell, 1998). "Bracketing", the practice aimed at containing the researcher's natural attitude in order to recognize and be aware of his or her subjective ideas (Garko, 1999; Giorgi, 1997), is a difficult skill to manage that improves with experience. During the interviewing process, self-reflection and personal experiences must be introduced in the study. Data collection and in-depth analysis are time-consuming and need a high level of emotional investment (Whitehead, 2004). In addition, the potential influence of bias on data collection is understood as reactivity (Whitehead). In order to prevent reactivity, awareness of the potential impact of personal and social characteristics on data collection is essential (Whitehead).

Ethics. Ethical issues can arise from the act of sharing lived experiences. Through telling their story, participants re-live their experiences, both negative and positive (Caelli, 2001). As a result, participants may re-evaluate their life or life choices, which can lead to happy or unhappy reactions. For example, Caelli found that participants made life changes in response to the research process. Furthermore, Caelli states that the act of researchers respecting an individual's right to make his or her own decision is an ethical issue. This must be acknowledged to a participant prior to an interview to

addresses any issue that may arise. If a participant wants to address any issues instigated by the interview, support and resources must be provided (Caelli).

Overview of Procedures

Purposive sampling was used to select female servers in the hospitality industry, including smokers and non smokers (Smith, 1995). Recruitment was conducted at 24 casual and fine dining restaurants in Kelowna, British Columbia. Restaurants were eligible for recruitment of participants into the study if they had: table seating, a full menu (i.e., breakfast, lunch and/or dinner meals) and staff that provided food and beverage service. Exclusion criteria for recruiting participants into the study were: bars that did not serve food, or restaurants without sit down service (e.g., deli style, coffee shops and take out/pick up only). Interviews occurred in various locations depending on what was deemed comfortable and convenient by each participant and included restaurants, coffee shops and university space. Interviews were not conducted in participants' place of employment.

Participants and Recruitment

Following ethical approval for this study provided by the Health Research Ethics Board (Panel B) at the University of Alberta participant recruitment was initiated. For each of the 24 eligible restaurants, I made contact in person and requested permission from management to provide an initial invitation letter to staff members (see Appendix A). I explained that the restaurant's name and name of staff and management would remain anonymous. If permission was granted, I gave the study information letter to staff members depending on their availability to speak with me. I then asked them to consider participating and to pass the information along to other staff members. This procedure

was followed at each restaurant. Participants received \$40.00 as compensation for their time in the study. A total of thirteen women working as food and beverage servers in the hospitality industry participated in a semi-structured interview. Six participants were self-described smokers (i.e., occasional or daily users of tobacco) and seven participants were self-described non-smokers (i.e., reported that they never smoked).

Data Collection Procedures

One semi-structured interview was conducted with each server. I guided the semi-structured interview to keep within the research focus but the participant led the interview to allow for the procedure to uncover interesting, unexpected information (Smith & Eatough, 2006). The interview was conducted with each participant at a pre-arranged time and place, at which time the procedure for the interview was fully explained. Each participant was also provided with an information sheet at this time (see Appendix B). I then gave them an opportunity to read the information sheet and ask any questions before signing the consent form (see Appendix C), which included permission for digital recording. Before proceeding with the interview, each participant was reminded that she would remain anonymous and could withdraw at any point in the study. The participant completed a short structured survey about socio-demographic characteristics (see Appendix D) prior to the interview. The demographics sheet was used to assist in the interview process and provide a preliminary description of the sample.

The interview guide (see Appendix E) was designed to facilitate necessary flexibility, that is, there was an attempt to establish and maintain rapport with the respondent, and the ordering of questions was viewed as being less important than the content of answers. The guide covered five topics: paid work, unpaid work and

caregiving, health, stress and coping and health behaviour. I followed interesting areas as they arose, and the interview followed the interviewee's own interests or concerns (Smith, 1995). During this interview process, I used the *bracketing* technique; a practice aimed at containing the researcher's natural attitude in order to recognize and be aware of my subjective ideas (Garko, 1999; Giorgi, 1997). In this way, I attempted to describe women's lives from the perspective of the participant in order to explore unexpected meaning and outcomes the phenomenon (Garko).

Phenomenology acknowledges a reciprocal relationship, a mutual exchange of knowledge and experience between the participant and the interviewer (Garko, 1999). Because I was previously employed as a server in the hospitality industry, I recognized that the participants and I shared some knowledge and experience related to this occupation. This connection served two purposes: first, I understood my own bias and avoided directing the interview towards what I thought the interviewee should say and second, it helped the interviewee feel comfortable that we shared an experience, not the same experience but a common history with some similarities. Interviews were, on average, one hour in length. At the end of the interview, I was careful to thank the participant and answer any questions she had regarding either the interview or the study. All thirteen interviews were conducted in this manner. I transcribed digitally recorded interviews verbatim. In order to assure anonymity, all digital recordings were stored electronically in a password protected folder on the researcher's computer. All raw data will be destroyed after a period of five years.

Data Analysis

Phenomenological analysis for the interview data used techniques described by Giorgi (1997; Giorgi & Giorgi, 2003) and Smith & Eatough (2006). Both Giorgi (1997) and Smith & Eatough emphasize the need for recognition and interpretation of subjective bias when interviewing participants and analyzing the data; a process termed "bracketing" by Giorgi. They also agree that the overall objective of the analyses is to be true to the participants' perspective of the phenomenon being described, while at the same time recognizing the researcher's own potential biases. I considered each transcript in relation to my own predetermined thoughts and perspectives. In this way, I attempted to move beyond my preconceived notions to an open awareness of what is presented in the data.

The framework of interpretative phenomenological analysis (IPA) developed by Smith (1995; Smith & Eatough) was used for this study because it offers a structured approach to analysis while at the same time preserving Giorgi's (1997) emphasis on phenomenological reduction and interpretation. By combining these positions, it was my intention that the content and complexity of the participants' beliefs and constructs of the phenomenon would be better understood and presented in detail.

After all interviews were complete, I concluded that I had a balance of non-smoking and smoking participants. It was at this point that I made the decision to analyse the data as a total of all participants and then as two groups (i.e., smokers and non-smokers). First, I began the data analysis by reading and rereading each transcript in detail. I then compared transcripts, looking for connections between, and commonalities among the participants. I then separated the transcripts into the smoking and non-smoking

groups to identify similarities and dissimilarities between them. The data analysis procedures followed four stages: description, code identification, themes and presentation. Each stage is summarized below.

Stage 1: Description. First, to engage in an interpretative relationship with the interview data, I read each transcript repeatedly until I thought I had a good understanding of what the participant wanted to share. In this way, I attempted to arrive at a holistic perspective on the interview content for each participant (Smith & Eatough, 2006). With each reading, I became more engaged in the data (Smith & Eatough). I “bracketed” while reading so as to be open to the participant’s experience and continued this throughout the analysis (Giorgi, 1997). My main motivation with “bracketing” was to be conscious of my thoughts regarding my ten years experience serving in the hospitality industry and to interpret the transcript in order to preserve and describe the participant’s perspectives, rather than my own.

This process of interpretation improved as I became increasingly immersed in the data (i.e., reading it for what it was and not interpreting the interview data with respect to my experiences). The process of reading each transcript several times in its entirety, then developing themes within and across transcripts helped to let the data speak for itself. This process is known as phenomenological reduction, and is the attempt to remain open to the lived experiences of the participants and the phenomenon being studied (Hycner, 1985). An example of this stage of the analysis is presented Table 1 below:

Table 1

Stage 1 of Analysis

Raw data	Description
Transcript 005: I also found that it was hard to quit smoking for that reason [smoking at work] and also when you get really busy and then crave a cigarette and then its really nice to go out back for ten minutes to have that break and a smoke. Transcript 010: It gets kind of hard, I try not to stress about it though that's also why I'm having hard time quitting smoking when I come back to work, I miss my 5 minutes outside alone away from the noise the chatter to just go and sit down and have a smoke. Transcript 012: yeah yeah well I usually have time like because I'm done a 4pm so that gives me just enough time to drive over there as soon as I get there I order something to eat get changed have something to eat and then start.	Participant has a hard time quitting while working at their serving job. One reason is that smoking is associated with having a break, especially when busy. Participant feels smoking is associated with work. Participant enjoys the ability to take a break from her duties. Smoking is associated with taking a break. Participant has a busy schedule and often rushes to work and eats there.

Stage 2: Code identification. After describing aspects of each transcript, I re-read each individual transcript again, this time to identify codes (Hycner, 1985; Smith, 1995). This stage involved moving from a general reading of the transcript to an interpretation of the material from different perspectives relevant to my experience in psychology and health promotion disciplines and the phenomenon being examined (Giorgi & Giorgi, 2003; Giorgi, 1997). I identified concepts and defined initial codes, marking the transcript

to denote each code. This task was done individually for each of the thirteen transcripts.

An example is provided Table 2 below:

Table 2

Stage 2 of Analysis

Raw data	Initial Codes
Transcript 005: I also found that it was hard to quit smoking for that reason [smoking at work] and also when you get really busy and then crave a cigarette and then its really nice to go out back for ten minutes to have that break and a smoke.	tobacco use/context of smoking/ addiction/perceived association with stress relief
Transcript 010: It gets kind of hard, I try not to stress about it though that's also why I'm having hard time quitting smoking when I come back to work, I miss my 5 minutes outside alone away from the noise the chatter to just go and sit down and have a smoke.	addiction/context of smoking/ need to absent from environment associated with tobacco use
Transcript 012: yeah yeah well I usually have time like because I'm done a 4pm so that gives me just enough time to drive over there as soon as I get there I order something to eat get changed have something to eat and then start	perceived lack of time/ irregular eating habits

Stage 3: Themes. Once the initial codes from all thirteen transcripts were identified, I then looked for connections across the codes and clustered them whenever suitable (i.e., some codes fit into more than one cluster). Each cluster was assigned a theme that is a descriptive label to identify the experiences being discussed by each participant. At this stage of the analysis, I applied initial themes to the phenomenon and my research questions. This was done by taking each research question and applying it to

the themes to determine whether each participant's experiences responded to, or presented insights with respect to each research question. At this point, themes that were unclear in their relevance to the research question were retained. Increased experience with the data and reading further transcripts led to clarity of relevant codes (Hycner, 1985). Finally, I separated the transcripts into two groups (i.e., smokers and non-smokers) in order to compare and contrast each group's perspectives and looked for possible connections and disconnections across themes as well as an emergence of new themes.

At saturation, that is, the point where nothing new was identified, a final set of themes was established and the raw data from all transcripts were rearranged according to these finalised themes. Then all relevant themes were organized within categories to describe the overall pattern of findings. Once the themes and categories were determined, an interpretation of the findings was conducted and used to describe each theme within a category. An example is provided in Table 3 below:

Table 3

Stage 3 of Analysis

Raw Data	Relevant codes	Theme	Category	Interpretation
Transcript 005: I also found that it was hard to quit smoking for that reason [smoking at work] and also when you get really busy and then crave a cigarette and then its really nice to go out back for ten minutes to have that break and a smoke.	Context of smoking/ addiction/ perceived association with stress relief/ unsuccessful cessation	Servers' Smoking behaviour	Context of Tobacco Use	<i>Socializing after work – smokers perceive combined alcohol and tobacco use as being common among servers</i>
Transcript 010: It gets kind of hard, I try not to stress about it though that's also why I'm having hard time quitting smoking when I come back to work, I miss my 5 minutes outside alone away from the noise the chatter to just go and sit down and have a smoke.	Addiction/ context of smoking/ need to be absent from environment associated with tobacco use/Stress			
Transcript 012: yeah yeah well I usually have time like because I'm done a 4pm so that gives me just enough time to drive over there as soon as I get there I order something to eat get changed have something to eat and then start.	Not relevant for servers perspectives on smoking			

Stage 4: Presentation. To present the findings, each category is introduced with a descriptive summary of the category followed by the category label and relevant themes. Within each theme are statements of interpretations of the findings, followed by selected verbatim quotes as supportive evidence of the theme and interpretation in the words of the participants (Smith, 1995). The identifying participant number and transcript page number are presented after each quote in the paragraph to describe location within a given transcript. The findings are separated into the two groups (i.e., smokers and non-smokers) to present the similarities and dissimilarities. One of three possible interpretations were found within the groups (i.e., perspectives were presented by smokers only, non-smokers only or both groups).

Trustworthiness of Results

When conducting a study it is necessary to consider and be responsible in following procedures as in order to present findings that can be trusted by others (Hycner, 1985). It is expected that researchers will adhere to research methods as much as possible and their results will be measured against their attempts at trustworthiness. Validity and reliability are two concepts presented to determine the trustworthiness of a study. Attempts to support trustworthiness in this study are presented below.

Validity. Two approaches to validity are used in an attempt to ensure the data is valid and that the phenomenon of interest is described. First, I made attempts to meet again with participants and confirm that the transcript was correct and that I had accurately summarized the participants' perspectives, thereby providing a validity check (Hycner, 1985). Unfortunately, due to time constraints and difficulty contacting the participants again, I was able to contact two participants only in order to receive the

approval of their transcript and summary, and thus unable to confirm accuracy of the other participants' transcripts. For this reason, I relied more heavily upon the second approach, namely, the degree to which the findings of this study fit with current literature on this phenomenon.

Reliability. The study must be replicable by other researchers in order to be reliable; meaning that others could reproduce the study and conclude with close to the same results (Hycner, 1985). It is acceptable for different researchers in a study to have different codes and themes for the same transcript. A researcher's attitude must be sensitive to the discipline as well as being sensitive to the phenomenon being researched (Giorgi, 1997). Therefore the codes and themes that I developed in this research are dependent on my perspectives and subjective attitude (Giorgi, 1997). As a reliability check, impartial researchers, (i.e., committee members) were available to provide assistance validating, modifying or invalidating my codes and themes (Hycner). This process developed over review of the analysis and dialogue with my committee members and resulted in acceptance of the themes.

Chapter 3 Results

Overview of Participants and Themes

Description of study participants. The participants included 13 women, 20 to 33 years of age. Three participants were married/common-law, three divorced/widowed, six single and one unknown response (i.e., did not provide this information). Three servers cared for dependents. Seven servers were students at college or university. Seven participants self-identified as non-smokers and six self-identified as smokers. The total number of years in the hospitality industry ranged from one to 19 years. The total number of restaurants that each participant had ever worked as servers in ranged from one to nine. All participants resided in Kelowna, BC Canada. Participants' information collected on the demographics sheet (Appendix D) is shown below in Table 4.

Table 4

Demographics

Select Characteristics		Participants	Range		Mean
			Min	Max	
Total participants		13			
Age (19-24 years)		7			
(25-30 years)		3			
(30-35 years)		3			
Smoker	Yes	6			
Non-smoker	No	7			
Marital status	Married/ Common Law	3			
	Divorced/Widowed	3			
	Single	5			
	n/a	1			
Have children		3			
Educ. (high school)		4			
(some postsecondary)		8			
(vocational degree)		1			
Student status		7			
Years as a server			1	19	7.5
Usual shifts per week			1	6	4.2
Usual hours per day			5	9	6.5
Type of shift worked*	Night	10			
	Day	9			
	Graveyard	1			
Length of shift	Night		5	9	6.2
	Day		4	9	6.3
	Graveyard		9	9	9
Have split shifts	Yes	6			
	No	7			
Usual split shifts per week			1	3	1.5
Total server jobs combined			1	9	3.8
Total current servers jobs			1	2	1.1

Note. Type of shift worked is defined as Night (4pm to 12:00am), Day (8am to 4pm) and Graveyard (12:00am to 8am).

Description of thematic results. Participants discussed their perspectives of their occupation as servers, role obligations, health and tobacco use in the hospitality industry.

The participants' concepts and ideas were clustered into themes within categories, as I interpret them. Each theme was presented by those participants who discussed it, (e.g., smokers, non-smokers or both groups), shown in Table 5.

Table 5

Outline of Themes

Category	Theme
Workplace Characteristics	• Work environment • Money • People-work
Occupational Community	• Social nature of serving • Servers and management encourage collegiate behaviour and social interaction after shift
Social Roles	• Student • Parent
Stress	• Work/life stressors • Four stress coping techniques
Context of Tobacco Use	• Servers' smoking behaviour • Smoking camaraderie exists among staff • Smoking takes place outside the kitchen doors, sometimes in the alley • Smoke breaks
Tobacco Control	• Servers have a negative perception of tobacco use • Servers support current smoking regulations
Life Transitions	• Temporary lifestyles

I have presented in Table 5 the final 16 themes identified in the analyses, organized within 7 categories. Within the workplace characteristics category, I describe the work conducted by young adult women in the service occupation. The occupational community category follows a description of the embedded social culture in the service occupation within the hospitality industry. I next present the social roles typically held by these women. I then outline the interplay of stress in their overall life and how that influences their coping techniques. With the structure of their work existence presented, I

then delve into the context of tobacco use within their service occupation in the hospitality industry. After describing the context of tobacco use, I then present young adult women's perspectives of tobacco control in their work. Finally, I describe the influence of the life transition period for young adult women on their life choices and risks for tobacco use. Verbatim quotes from smokers and non-smokers have been separated for each interpretative finding throughout the results to define their similar and dissimilar perspectives.

Category: Workplace Characteristics

Participants often reported experiencing physical labour and fatigue due to the physical weight they carry (e.g., heavily laden food or beverage trays, and packing dirty plates), constantly moving on their feet and working atypical hours (e.g., shift work). Money was reported as being the ultimate motivator for serving. Non-smoking participants portrayed serving as an occupation that requires extensive skills in communication, time-management, multitasking and the ability to be personable. Both smoking and non-smoking participants reported that they value fast, instant cash and feel unable to quit their serving job. All servers interviewed shared the experience that the job is physically difficult but that the money made the job worth it.

Serving placed a heavy emphasis on people-work (described previously as the act of consistently places others' needs before a worker's own) and can result in psychological distress, negative health behaviours and poor health outcomes (Williams & Kurina, 2002; Sprout & Yassi, 1995). Findings from this study suggest that social interactions and exposure to interesting people are both positive reasons given for serving. However, interacting with people can also be frustrating due to the emotional

labour experienced by both smokers and non-smokers. Servers participating in this study recognized that their job involves management of their emotions, and the ability to pretend to be happy or enthusiastic for the public. This behaviour can be very physically and emotionally draining. These servers described money as the main motivator to conduct this type of work.

Theme: Work environment

Serving was presented as a stimulating occupation involving constant change and a high volume of clientele:

Non-smoker:

It's busy too, it's the busy slam, 12:00 to 2pm slam, a full restaurant seating, everyone comes and sits at once, you're sitting seven tables at once and it's crazy, then everyone gets their mains out and then everyone leaves and then boom everyone sits again (002 – P6 NS⁴).

Smokers:

When it's really busy, like game night, when there's an event and it's so crazy and high volume people (001 – P1 S).

People are great, yeah I love people, just kidding, it's good because its fast-paced, it's never the same thing, they're my type of people. For example, I can't sit behind a desk and work, I need to have a constantly moving, changing environment, something new happens every day. That's why I like it. Usually your lifestyle adjusts to the environment you are in, the situations you work in, and you get to meet lots of interesting people, people that you would probably never interact with anywhere else (003 – P1 S).

I'd say in general my job is good and pretty mellow and fast-paced. A kind of place that it was just kind of all at once and it was really, really busy and you had to really be quick and stuff like that (005 – P1 S).

Servers reported their job as demanding and stressful but also fun:

⁴ Participant quote reference number: for example 002 (participant #)- P6 (page #) S or NS (smoker or non-smoker)

Non-smokers:

It's actually pretty fun most of the time that's why I still do it because it's a way to get away from academia and of course you make extra money, the restaurant I work at is well, I've worked at restaurants that [are] well lower class before in BC (004 – P1 NS).

Smokers:

Demanding, stressful, tiring but at times, fun. It's fun because you know you're curing cancer so like mentally, it's exciting because it's pretty fast-paced and you sometimes wait on your own friends and that can be really fun (001 – P1 S).

It's hectic, hectic and I would say, sometimes stressful but half the time its fun. It's a good job (013 – P1 S).

I like working in this industry, it keeps me young and it's fun. I'm not just mom anymore, I'm a hip mom, I'm up with the everyday and the up and coming music and stuff. I have my social life, my going out life and everything at work. I don't ever have the need [to go out] (003 – P5 S).

I like being a server because I like the money I make and once I know what I'm doing like the particular restaurant I'm working at. It's pretty easy as long as you stay focused and stuff but it can be really stressful when it's busy and it can be draining, it can take a lot out of you because sometimes I'm super tired at the end of my shift but it's ok, it's not something I would do for the rest of my life but it's good for right now (012 – P1 S).

Servers discussed that the service occupation required of them a unique skill set, including communication, multitasking, time management and ability to be personable:

Non-Smokers:

Servers are always usually personable anyway because of the industry, you kind of have to be (009 – P1 NS).

It's really interesting, it compares so much [to]factory work, obviously the service is number one priority, you're almost like a panopticon, you don't know when people are watching you or there could be even mystery guests and they could be watching you (007 – P2 NS)... You really have to communicate it's a hard job communicating to each other and communicating with your customers is like, you might not think that you're just walking past a table cause you're busy and no big deal but it is

for them so you need to say, "Hey I'll be one minute and be back for you" (007 - P4 NS)... I think everyone should experience serving at some point in their life. You learn so much about multitasking and improving my memory for school (007 - P5 NS).

You have to know what your job is and try to do it the best you can. Some days are harder than others you know so but it's a level of respect that's what that industry really is about and you need to have it for really just about everyone if you can (008 - P6 NS).

[As the server] you represent the ENTIRE system [as the front of the restaurant] (002 - P8 NS).

Smokers:

If you're dealing with the high volume of clients, you need multitasking, it's all about minutes, you use your minutes wisely (003 - P2 S).

Both groups experienced physical labour and fatigue due to constant motion, carrying weight, and atypical work hours:

Non-smokers:

At the end of the day, the older you get, you get pain around your hips when you're walking on hard floors, sore feet. You're constantly in motion, running back and forth. You're always starved at work so there's always bread and restaurant food around so that's not good for you, you balance the working and eating (002 - P5 NS).

All day you're on your feet, all day, not really much of a break, you don't really eat, you're starving and serving food (006 - P13 NS).

Physically I noticed, from walking so much and when I just started my knees kind of would get sore and my lower back would get sore from carrying the trays and stuff too (007 - P12 NS).

Sadly I just can't think of anything else I want to do right now. Typically, my body says stop because you're hurting in my shoulders, my feet (009 - P11 NS) ...I feel good it's just the only thing I'm starting to get that I should be concerned about is I'm starting to get concerned about my spine because I'm so tilted to the side with the big trays and it just puts so much stress on your back and carrying those heavy trays lopsided and my wrists sometimes hurt I don't want to wear my wrists out and carpal tunnel you know (009 - P12 NS).

Smokers:

I think the hours is what made it awful, you would close and you wouldn't get out of there until 2am and you would have to be back to work at 6am to open. I swear I was trying to function on four hours of sleep a night (001 - P10 S)... You have to be fairly nocturnal to be a server anyway, especially an evening server because you don't have regular hours, you don't get to sit down and eat a meal until after your shift. Physically, too, oh not so much like when you're young and incredibly energetic but now you get nasty leg cramps, shin splints, you get tired, you're wrists give-out. Physically it takes a lot out of you. (001 - P1 S)... I swear sometimes my wrists will give out to this day, like service tennis elbow - service wrists (001 - P8 S).

You take a beating let's just put it that way (001 - P10 S).

We carry a lot of weight. We carry the big trays and the plates are heavy, everything is quite heavy. Yeah for sure and oh feet, I always have to say, if I don't have good shoes I can feel it in my back, so I spend about \$200 on a pair of shoes and that will last me a year. Well, health-wise if there is anything that's worst for servers is probably the wrists so because you're carrying like, I won't carry my trays up like this [one hand over shoulder/head in the air] that's probably carpal tunnel situation. I try and I keep my hands flat, even, but I do put my large trays and balance it on my arm. I should as well as my hands so I'm worried that my wrists could go and I've seen people with carpal tunnel syndrome and I'd hate to have that and my back (010 - P11 S)

Well, like sleep because if I like, say tonight I'm done at 11pm, by the time I cash out and drive home its probably about 11:30pm. I have to get up at 6am for school. It usually takes me about 1 hour of sitting there before I'm tired enough to be able to go to bed, you know, so as far as that sleep goes it's not really that great. I'm totally wired and actually do you want to know what it is. It's that I frequently have serving nightmares. People at my work talk about that a lot too it's so strange (012 - P4 S).

Theme: Money

For both groups, the most common motivation for serving and continuing to serve was tips - fast, instant money:

Non-smoker:

Totally for the money, it's so for the money especially when you're going to school and you can work two nights a week (002 - P2 NS).

Smokers:

Money, like let's be real, the tips are good, you know, they are quite highly addictive, fast cash (001-P2 S)... the job is good for instant money, gas money and I can buy his [dependent] bus pass. I have cash to give him [for] what he needs (001 - P7 S).

Money's good, having cash on hand every day, you get used to it (003 - P1 S). I do it for the money, I don't do it 'cause I love it. Just like anyone else that works in that industry, you do it because of the money (003-P3 S).

The money when you're working that much like at the end of the day, you'd just have so much cash so it totally seems worth it (005 - P5 S)... It was just a way of getting fast money. It was never something that I really loved it or whatever it was something better than retail (005 - P6 S).

They work around my schedule and it's fast, easy money. There is nowhere else that you can walk out with \$150 a night with four, five hours of work (013 - P3 S).

Both groups can find it difficult to make the decision to leave the hospitality industry because of this fast, instant money:

Non-smokers:

I'm sure I'd be happier working somewhere else. I'd love to work in a coffee shop or a book store or something but it's just the money that keeps you there (011 - P9 NS).

I've been so frustrated over the last two years that I've just wanted to quit but again I'd be working for maybe \$9.00 an hour. I can't live on that so I sort of stumbled into [serving] but you know it isn't a horrible job by any means (008 - P9 NS).

I'm scared of moving you know. I think it's excellent because of the money that's why I'm so stuck here because I been here for just over three years and now and I'm stuck I don't want to go anywhere because of the money (009 - P20 NS).

Money obviously, always having cash on hand is definitely helpful and it helps you to deal with stress. (004-P3 NS)

Smokers:

I don't know I never really wanted to serve before but [was] a job at my old work so I kind of took it and then fell in love with the money more than anything (012 - P4 S)... It can be a vicious cycle and one thing I hate about serving is that you never know what time you're going to be off that bothers me a lot and you never know how much money you're going to make so you can never totally depend on it. You're always trying, trying, trying (012 - P16 S).

Theme: People-work

Both groups believed that social interactions and exposure to interesting people were positive motivations for serving:

Non-smokers:

It's very dynamic and you can meet a lot of neat people, make some good friends. Just 'cause you're a server doesn't mean, you know, or can you learn how to juggle multiple tasks at the same time, and its interesting talking with people from all over the world, especially because Kelowna is a big draw for people. (004 - P3 NS).

I love it, I love being around the people, I love people. People think I'm weird but I really enjoy it, maybe it's the variety of customers too, the regulars, the seniors and the families and I'm comfortable around people that aren't my age so I really enjoy it and I have lots of good feedback from customers you know. I'm happy to be there and I've never been upset to go to work and I've been there for 9 months and I wake every morning and think, "All right I get to work today" and it's exciting for me. I like the people (007 - P4 NS).

I would say I definitely enjoy being a server I like the public. I like to interact with people on a daily basis it's kind of fun. It's interesting some days are better than others of course but I really enjoy it. I like the people aspect of it you know you just have to get along with so many different personalities of the different servers (009 - P2 NS).

The social part, the instant money you meet people all the time you're always talking to people and that's the fun part the stressful part sucks (009 - P12 NS).

Smokers:

I like the environment and the people and it's uplifting (013 - P4 S).

The shifts are good, they're fine, usually your lifestyle adjusts to the environment you are in, the situations you work in, and you get to meet lots of interesting people, people that you would probably never interact with anywhere else (003 – P1 S).

A server's main focus was dealing with the public – pleasing people could be rewarding and frustrating:

Non-smokers:

How the shift will be depends on the customer as well some people are easy to please and some people are so picky and send things back.[Customers] their ideas of hierarchy or something when they're ordering and I'm serving so it can be difficult (002 – P1)... Good and bad, some people every time you approach the table, you're going to get a snotty look or just totally ignore you or something (002 – P3 NS)... Also, awesome people that you meet and connections you make. People are interested in coming to my art shows or want to purchase art so you can work that in (002 – P4 NS).

If it's something beyond my control and people don't understand that especially like when your food comes out wrong because of the kitchen I don't have any control over that it just happens but I think some people come in looking for a fight as well. People just look to piss people off. I had a lady snap her fingers at me the other day (011 – P5 NS).

You know, you're doing your best to try to give good service and you can only stretch yourself so far and I think you know what generally public-wise most people understand, they can see that you're not playing around talking to someone, they can see you're rushing to do things so they know (008 – P16 NS).

Smokers:

People are great, I love people, just kidding. People! After a while they suck, they're demanding and I guess you go out to eat or drink or whatever you get that hands-on, cater to me and it's annoying after while. Some people just take it to the extreme, rude, demanding and you know, sometimes the high volume sucks. They can wreck your day in a second (003 – P2 S).

I like dealing with happy people. I've had some bad experiences just because a lot of people are what I found from serving are miserable. They are not happy. You think they'd be out for dinner, but a lot of them aren't happy and they just find something [wrong] you know, they're never

happy how good a service you give them, so that's the problem I have with those kind of people (013 – P2 S)... it doesn't really [get better] you have to get used to it. At first, it was really hard cause I'm like, I just asked those people how their night was and they didn't even answer me and the servers are laughing at me like (Name) get used to it you know. You just kind of have to be like ok so its not too bad for me because I try to, if I'm having a bad day, to just get over it you know because you kind of have to there's not point its just going make your life, it's going to get worse and worse and worse so I try to forget about it (013 – P3 S).

Dealing with the public, I think it's a farce really. You're their lackey. They're there for a whole event, the whole experience. In fine dining, they have really high expectations, I had one person actually comment that I had a little stain on my tie but I had got it that night (001 – P1 S)... I think that sometimes people just interpret it as servers are actually their personal slave for that portion of time (001 – P4 S)... I think they like to feel so much that they're making you work for peanuts that they're going to leave you (001-P5 S).

It's a mixture of many, many different things, like what I have to say is that there are some really good days and there's some really good customers and yeah I used to go through it and I used to put on the charm but the way I used to tell myself is that I was about to perform, kill them with kindness, I had all these little modos and I catch myself sometimes (010 – P3 S).

Both groups experienced emotional labour as a result of dealing with the public:

Non-smokers:

Sometimes you can get kind of drained if you're having a bad night. It'll show and reflect on one customer to the next and when you try and when you just really don't have that smile always on your face they'll notice that and it's really, every shift is a new day and you have to act like you love it (006 – P7 NS). Sometimes it's fake, sometimes it's like really this is not how I'm feeling but I'm trying to keep it up (006 – P8 NS).

I mean you have to go in and try to make it good when you get it there regardless of what's going on and when you're working so close with other people you're really working with everybody else's moods and emotions as well so over the years what's worked for me especially on a Sunday is to basically work like there's nobody else there as far as working with coworkers and of course you've got to try to stay up-beat all the time and that's not always easy for anyone but you do the best you can you know be pleasant (008 – P3 NS)... After seven hours you can't keep the momentum and it's you're just tired and it's hard to be really, really

nice and it was very hard to pretend to even be you know it wasn't that I was mad at anyone but I was so dam tired that I could barely walk to the table I was just dragging myself (008 – P8 NS).

I like it on good days like I really enjoy interacting with customers like especially when I get to be in the lounge and it's kind of like a more chilled atmosphere and people are there to like hang out and talk. I really love to talk to people so the only thing I don't like about it is when I'm having a bad day I'm not allowed to be having a bad day. I like, have to fake being happy and if I have a bad attitude I get written up about it and I get crappy shifts for the next week (011 – P3 NS).

Smokers:

You have to be nice and pretend like you're ok I mean but lots of jobs are like that but I mean, but catering to peoples' needs when you have 10,000 other things to do and trying not to be like, "Can you just hang on a second?" you know, like you have to be nice sometimes. I have a hard time with that and I don't know it just can be really stressful when like ten people are trying to ask you something, you're trying to remember an order and you're like, "Just don't talk to me right now" (012 – P6 S)... I give everybody the benefit of the doubt and I like people but I don't know it is you have to be patient and put on your happy face even though you don't want to sometimes, yeah it's hard to do but I just think I'm good at it now you know pretty much and I've had other jobs before with the same kind of deal right, dealing with people you always have to pretend like you're happy even if you're not so I don't know but some people are (012 – P13 S).

The most I've learned at this job is that even with coworkers is, everyone is just so different and you're like, "did they just say that?", you know, you think that in your head but at the same time you're like whatever you just have to, you have to adapt to so many different people. It's not normal life when you can just be like, "Shut up" or something right, you work with these people and your customers you have to be, no matter what they say, you're just, "Ok, yeah, cool, I can see where you're coming from" you just have to do it (013 – P14 S).

Category: Occupational Community

I have now presented a description of servers' perspectives of their work characteristics, the physical aspects and skills required for the job. These servers placed great emphasis on their social interaction with others, most specifically, caring for the

public's needs. The social nature of the job, dealing with people, coincides with a tendency to socialize among servers. However, smokers and non-smokers portrayed different experiences in their descriptions of the social nature of serving. While both groups felt socializing and drinking after work with other staff members is a common practice encouraged by the hospitality industry, it appears that smokers actively engaged in socializing and drinking after work. Smokers reported that socializing after shift often leads to unplanned excessive drinking. Smokers also discussed the necessity of purchasing alcohol for other staff members as reward for good performance on shift, drinking after work at a new job to gain acceptance and make friends. Smokers perceived a social bond or connection with other staff members, most significantly with those who smoke.

Non-smokers, on the other hand, reported a sense of social disconnection from other staff, especially during alcohol-facilitated socializing after work. They also discussed the challenges of working with other staff members, a point not commented on by smokers. Although there was this sense of disconnection between the groups, servers overall have a shared experience of service work and place great importance on teamwork. These aspects and the very social aspects of dealing with and pleasing their customers define servers as members of an occupational community. The atypical hours servers work, the frustrations they feel with customers (i.e., emotional labour), and the socializing with other staff members and drinking after work may influence servers' feelings of marginality, the key factor in the development of an occupational community.

Although servers in general exist within this community context, smokers and non-smokers can be defined as subgroups within this community. When comparing the

two groups, the smokers appeared to have a stronger social connection than the non-smoking group, giving them added advantage in the context of the work environment.

Theme: Social nature of serving

Serving was about being part of a team:

Non-smokers:

I enjoy the restaurant now and I think just because of the staff. I get along with them and it's a work atmosphere where everyone helps each other out, it's really a team effort. (006 – P5 NS).

A social thing, smokers often reported a social bond with other staff members:

Smokers:

On Friday it was my last shift I felt kind of emotional all day and I couldn't really figure it out and I mean I do consider (Restaurant) kind of my family I've worked there for 3 and a half years and I'm pretty close friends with the owners and stuff but when I kind of realized that I was quitting and that's kind of why I was really emotional because not only am I quitting (Restaurant) but I'm pretty sure that unless something crazy happens and I lose a job or am kind of down and out or whatever I probably will never serve a table ever again. I don't think and that's, I mean I did it for ten years and it's such a social thing and stuff that you, it's, I don't know if kind of means something but it's a social thing too so you build relationships that way and it's definitely something like a passage in life I guess and that's what it felt for me on Friday so I was a little teary about it (005 – P7 S).

All my best friends I've met pretty much through serving. It's quite a social job too so you do get that camaraderie (001-P16 S).

I work with a lot of cool people so, usually they can tell if you're busy and people are like, "Hey can I do anything for you?" and it's great like, managers are like that too so it's never a really bad situation, 'cause somebody will always be here to help you and my best friend that I grew up with works with me too, so she's awesome 'cause she's served way longer than me so she's always got my back she's always like " (Restaurant) do you need anything?" and she'll even take orders for me and I'm like, "Thanks", if it's really hectic (013 – P7 S).

Non-smokers felt that other staff can be a challenge to work with:

Non-smokers:

The people you have to deal with that you work with, sometimes there's a lot of ego that gets involved with it too. Like when you're dealing with bartenders and even some kitchen staff too, extreme ego (002 – P2 NS).

There are servers who are lazy, or have no clue what they're doing and stress-out and you have to cover for them. They're not paying attention so they don't see that they have been sat a few tables, even if they may have been told that they have been sat and just some coworkers are jerks too, they're assholes (004 – P3 NS).

You can tell when they're angry too, you know, when somebody's throwing stuff around and they create a different situation that isn't comfortable when everyone else looks like they're almost having a good time you know, and be able, you know, it's funny I'm talking to you 'cause today was exceptionally one of the days where I never heard any anger or anything in the kitchen everyone was just bantering back and forth and having a fairly good time and that really helps (008 – P6 NS).

Theme: Servers and management encourage collegial behaviour/social Interaction after shift:

Both groups perceived overall socializing and drinking together after work as very common:

Non-smokers:

There's always a party going on (004 – P10 NS).

We've probably got about ten people that go over for a drink and just kind of relax and talk about nothing, try to avoid work topics and you know we have a staff party coming up so that should be fun so we'll see what happens there but yeah, I get along with pretty much everybody, except maybe two (009 – P21 NS).

...at some of my jobs, like at (Restaurant), we'd just hang out there and watch movies or something after the restaurant closed and just like, have a good time but here like, everyone kind of just goes and like, "Yeah like, we'll go out after sometimes and have a few drinks after work" (011 – P17 NS).

Smokers:

I've always kind of hung out with the people I've worked with. I mean I don't consider the people I work with to be my best friends or anything, but I definitely will go out for drinks with them after work and hang out with them. I've usually had pretty good experiences with other staff (005 - P3 S).

I've always been able to work with pretty fantastic people so that's fun the camaraderie too. It's always nice to sit down after a busy Friday night or Saturday night shift you know and just have a couple of drinks with the girls and laugh (001 - P2 S).

We do go out together. We all go out together quite a bit and we're all pretty much friends. I like everyone that I work with. I actually don't really have a problem with anyone but I don't usually I don't know (012 - P1 S).

Smokers felt that socializing and meeting new friends at a new job was facilitated by alcohol:

Smoker:

[To meet friends at a new job] yeah, you're not going to sit there and watch them drink. I'm not a huge drinker but I don't think I would have drank at all if I hadn't worked at (restaurant), I don't think I did before then (001-P14 S).

Smokers reported that purchasing alcohol for other staff members' performance on shift was encouraged by the hospitality industry:

Smoker:

Drinking the [hospitality industry] encourages. It's because if you've had a busy night right, you want to be able to give your bartender a few and how do you repay sometimes your busser, you buy them a drink after work. You put some beers on ice for the boys in the kitchen, I think it's way more encouraged drinking (001 - P14 S).

Smokers reported socializing with other staff members after work hours was an opportunity for excess drinking:

Smokers:

[Serving] brings [health] down. I find I drink more alcohol when I'm working just because of the kind of work because you're around it all the time it becomes routine you get off work at night and you have one or two drinks or whatever so I was find that I was drinking more it was becoming such a habit (005 - P7 S).

There's more opportunity to go out, there's more opportunity to drink, there's more opportunity to eat bad, to sleep in, right so it can, you can turn into a bit of a slob if you're a server, I think that's for sure, but I mean it depends on the person if they're going to be healthy they're going to be healthy no matter what job they have, but there is more enticing you in that environment I'd say (012 - P13 S).

I'd say alcohol and drugs are a problem in the service industry alcohol in particular and I was never, I'm divorced now but I was married and there was always school and stuff for me, now I'll go out once or twice a week but there are people like, for example (Name) it's like they wonder where all their money went it's like Cheers to them (004 - P5).

Non-smokers reported not participating socially after shift, which they perceived resulted in a feeling of disconnection from fellow staff:

Non-smokers:

The thing is at (Restaurant) is that if you didn't go out and party with them and be all friends with everyone, it was hard to be in a team effort at work, like they are nice enough to you. I didn't like mixing my personal and my work a lot of the time. I try to keep that separated but the kind of thing is if you don't go out and drink with your friends at work then you're not in that clique right (006 - P5 NS)... A lot of the people would be like, oh yeah and just talk about partying and about how stupid this person was because they're so hammered that they did this and there are some people that are embarrassed by it and its spread around all night too and like managers party with some of the servers and kitchen too (006 - P7 NS).

[Manager] was the kind that would come at the end of the night and drink at the bar, and the staff would stay late and hang out, I would never stay after and that was why I didn't fit in, I don't like bar, club, whatever. I notice that I didn't fit in because I wasn't hanging out with them. [staff] actually said that to me when I worked at that place that's why I didn't fit in because they said, we don't just work together, we encourage people to hang out after work and I didn't like them saying that. To me it didn't feel like encouragement but being told and then I was way more reluctant and I

think I stayed once after work one time and I was like this isn't even fun, I don't know what to talk about. I'm not easily, like I don't succumb to like social influences at all. I'm just such an independent person so when someone says that to me it doesn't bother me and I just go the opposite way. They were unsupportive and they were just not friendly, they'd leave me, and I'd hang out by the door (007 – P15 NS).

Category: Social Roles

In the following section, I presented the context of servers' workplace characteristics and the notion of a server occupational community to support the idea that young adult women in this occupation are a unique subgroup. As a subgroup, these young adult women have challenging social roles that influence their ability to maintain a health work/life balance. Social roles, such as those of students and parents, were often mentioned in addition to their occupation. Shift work was a common type of scheduling that can be difficult to conduct, but allows for flexibility when attending classes and working around family needs.

Theme: Student role

Although shift work could be difficult due to atypical work hours, it does provide a schedule that facilitates attending university/college for both groups (n=7):

Non-smokers:

I've already went (sic) for three and a half years, this is my fourth year of school (007 – P1 NS).

I'm working towards an education (002 – P4 NS).

I went into serving because my friend was going to school and if I do go to school I could still work part time, a lot of servers go to school. I hear them all talking about their exams and they just recently they finished and how hard it was and stuff like that and it keeps me motivated like I still want to go to school and my boyfriend gave me that idea, [to] get into the service industry because if you want to go to school you can still make money (006 – P11 NS).

Smokers:

I've only been working one shift per week because I'm in school but before then I was working full time in the summer (005 – P1 S).

Probably for the next three years I'm guessing right through school, this is my first year of business so I'm going to be in school for another three years and it is a really good job to have going through school (013 – P3S).

Lots of servers are students (001 – P2 S)... [Fellow server] was only working a few shifts a week and all summer because she was going to school, she was going to UofA (001 – P3 S)... You can go to school and work crazy late shifts, when other businesses are not open, so I think a lot of it is easy hours that you can get at weird times (001 – P16S).

I first moved out because it is like the cool thing to do, you know if you had a split shift it was great because you can go to a morning class and an afternoon class, the latest well for example when I worked at (Restaurant) the latest it was open was 11:00pm well that's still enough time to do your homework go out if you wanted to so that's not bad at all (003 – P3 S).

Theme: Parent role

Servers (n=3) with children felt that childcare can be a challenge to accomplish on a server's schedule but also allowed parents to share the childcare role without added expenses:

Smokers:

[I'm] exhausted and I wish I could talk to [dependent] a lot kinder than I do after work when he's still up and I'm tired. I just want to be left alone, I don't want to fix someone else another drink of, you know, water. The job is not supportive of caring for [family]. It's not their responsibility. They could not care less (001 – P7 S)... The guy that I work with he has a family, his wife works full time during the day and this is his career, he just waiters that's it, that's all he does, five nights a week. He works opposite to her so I don't think they ever see each other. They don't get childcare which is huge and this allows during the summer time for him to be able to take the kids to sporting things like so they can actually have a summer schedule when they're off school and then of course still have a caregiver there at night too (001 – P4 S).

[Working with a family] it's hard it sucks. We don't have time together. My partner works days. I prefer it this way because I don't want my child

raised by somebody else, when you add daycare, I'm not going to be able to do this and make this amount of money when I'm 40. I'm not going to be a CEO or whatever so I'll suck it up to give him the best possible life I can (003 - P4 S)... I sleep when my child takes a nap, on the weekend I sleep in because my partner is home (003 - P3 S)... It's difficult but worth it I think, there's more positives than negatives. I get to raise my own child, yeah I'm tired so what, everyone is tired in this day and age, everyone's busy, everyone is hurting. I make great money for a short period of time and I get to spend time with my kid and I get to have fun and keep myself, like young (003 - P14 S).

Non-smokers:

It's definitely a good way to make money if you have a kid and stuff; it's really flexible (011 - P17 NS).

Category: Stress

Servers reported significant work/life stressors within the context of their occupation. Both groups associated stress with their ability to function within a constantly changing environment, maintain time management, deal with emotional labour, manage social roles and work effectively with staffing issues. Non-smokers further associated stress with staff problems and meeting expectations at university. Social support, physical activity and alcohol use were coping techniques mentioned by both groups. Tobacco use was consistently described as a stress coping mechanism.

Theme: Work/life stressors:

Stress is associated with timing and constantly changing work environment:

Non-smokers:

It's an industry that's just a little bit more stressful (008 - P2 NS). Just in the fact that if you take a situation where you're very, very busy and people, more people than probably sometimes needs to be and everybody is rushing, really rushing around and obviously a stressful situation right away and then all restaurants are based on speed for everything. Everybody knows if you're working Sunday you're stressed you are going to have that level of stress but, I've known so the only way I can deal with

Sunday is to calm myself out is just ignore what's going on you know; you've got orders in the kitchen (008 – P15 NS).

Smokers:

Sometimes I don't think that it is [stressful] because I don't even have enough time to be able to think about being stressed out, you know (012 – P7 S).

Stress at work is really high, my health sucks, air conditioning, cigarette smoke, you know, I'm always sick pretty much, lack of sleep. If that's not enough to age you, I don't know what is (003 – P6 S)... Stress is in everybody's life this day and age. Who has a stress free job or life? Please let me know (003 – P8 S).... Your job is stressful everyday and it's a high stress job and whatever, our job is stressful in short bursts. You start at 9pm, you get stressed out at 10pm because there's like 1000 people and then like the lunch rush, you're dead, you get slammed and then you're dead, like in short bursts. Like mini heart attacks. It's stressful for short periods only and it's a high stress job yes, because customer service is making everyone happy, making everything right (003 – P8 S).

It's kind of like you just get used to the stress 'cause you're always on the go, but if I stop and think about it, it is really stressful because sometimes like for instance, tonight I close the patio, so I have to go home from school go get changed, eat something really fast and I'm pretty sure I'll be starving when I get off right, and I have a final tomorrow so (013 – P6 S)... That can be a little stressful but I seem to pull it off somehow. It's just when you get super busy and you have like so many tables you can't even handle sometimes like, it's a different kind of stress, it's like almost the you can't even think, like you can't you know if you served you know you can really like stop and be like, "Ok what am I doing?" or you're just like, "Woo, I have no idea" (013 – P7 S).

Dealing with the public is a source of stress for both groups:

Non-smokers:

It's stressful sure, it doesn't seem like it would be when you're trying to explain it to somebody who's never served before... What, you just take orders you know, like put it down and take it away, but is not it because you're constantly trying to please somebody and having to please somebody and meeting these expectations and standards and everybody's varies [in] personality [you have to] character gauge (002 – P8 NS).

That's what other people don't realize too, is how stressful it can be and how exhausting it can be at the end of the night 'cause people are bitching at you (004 - P8 NS).

Smokers:

Well [serving] definitely can be stressful while you're working when its really busy or you're understaffed or the staff aren't doing what they're supposed to be doing but it's not stressful, it's not the kind of job where, I don't think at least, where I'm going to take it home with me at night (005 - P11 S)... Unless I've had some really crazy experience like with this one guy who was getting all worked up about me ID-ing his friends or whatever and sometimes I take that home. Also, even having to work weekends all the time, I think that is pretty stressful (005 - P12 S).

Stress was associated with staffing issues for non-smokers:

Non-smokers:

This summer, there are days definitely, especially when things are not set up when you arrive at work at 4:45 and you start at 5pm and there was a few instances this summer on the patio at (Restaurant) where 'cause there's all this stuff that has to be set up for [the patio] to run properly and that day staff hadn't done it so all of a sudden there are all these people and you don't have the stuff ready there's been a few times when I was like "I'm fucking going to snap" (004 - P4 NS).

The business was changing constantly and then, we were all picking up all the slack every shift it was terrible we were understaffed, the kitchen was slow, it was just crazy there and I had to get out of there (006 - P2 NS).

Both groups reported stress in their work and school roles:

Non-smokers:

Not from work, sometimes I get really, really stressed about school and then I have to go to work so I feel stressed at work (011 - P11 NS).

Now it's just school stress (004 - P4 NS). Last week I was freaking out because I had 114 papers to mark and I was supposed to work on Friday and because it's October and there's very few servers left because they've all gone away and there was only one server who could potentially cover my shift and she couldn't so I was like freaked. I was actually on my way to work I was driving and they gave me a call and said don't worry about it and I was like, "Thank you God" (004 - P4 NS).

I phoned and said I'm really stressed out right now and I don't feel it will be good for me to come in, I'm going to be really stressed and agitated, on edge and stressed and I don't feel like I'm going to be able to come in and I really don't think I can come in tonight, and then it was like call someone and I don't know, anybody, and I called my mom and I was like, I don't know what to do, do I just go in and like maybe fail my midterm for this job and so I told them I'm not coming in and then they found someone else and then they phoned my back an hour or two and they said, "You're lucky we found someone else and don't come back" and I said, "Well do you mean the week off?" and they're like, "No, don't come back, you're done" (007 – P16 NS).

Smokers:

I think serving is crazy but it never like keeps me from sleeping at night whereas a job like what I'm doing now with school and stuff. I mean that stuff that you hold with you all the time but not serving, serving was never stressful like that (005 – P12 S).

Theme: Stress coping techniques

Both groups sought social support from other staff:

Non-smoker:

I'm hoping I don't have to be there much longer so when people come to me, because people do quite often "cause I've been there, like two of us the longest, so they always want to vent on you, and its like, you know, what all I ever say now is it's always been this way and it's probably never going to change, so you know, you just have to make the best of it. And it's true, it would drive you crazy if I had let everything get to me the way some of the young girls do then I would be in trouble, you know, health wise for sure, plus I'd have to quit. It would be just too much (008 – P4 NS).

Smoker:

When you're at work, when you're fortunate enough to work with a good friend or server you can vent (001 – P11 S).

Both groups mentioned physical activity:

Non-smoker:

I go for a run or walk, just get out of my house and do something (011 – P13 NS)

Smoker:

I work out, it makes things feel better, a lot better and I'm a driver, if I'm stressed out. I've always been like that. I'd go by myself and just turn my music on and just drive. My ears are ringing constantly, I drive that's all I do and I work out. Working out has been a huge stress reliever and running. That's the other thing I started doing. I figure why not stay in shape and get rid of stress (003 - P9 S).

Servers reportedly used alcohol:

Smoker:

The alcohol consumption of waiters and waitresses is because they're so stressed out, it's easy access, it's right there (001 - P8 S).

Both groups reported servers use tobacco:

Non-smoker:

I know that this poor girl, older lady, got hired on the same time as me she was like a chain smoker she always had a need for a smoke and she was like, and she's having a hard day when she's stressed, she will bitch about, "I need a smoke right now" you know, "I need a smoke right now" and it was funny, I laugh, I love it, la la. I'm free, I couldn't imagine how I'd feel if I smoked. She'll get over the big rush and as soon as that is done she'll have a few seconds, "I'm out of here, I'm going to get a smoke", she'll do that and slow herself down, and me I'll sit down and have a drink of water or something (006 - P17 NS)... I drink lots at work, I don't know, I'm thankful I'm not a smoker because my sister [server] is, it drives her crazy (006 - P18 NS).

Smokers:

Not at home, it sounds like a cop-out, oh, I'm just a weak little thing at work but no, not at all, nobody smokes at home. Maybe you're as busy at home but its not as stressful, you don't have to have those dishes done in ten seconds or the tables are going to walk out (001 - P15 S).

I smoke at work sometimes if I get stressed out. I stopped when I was pregnant and then well I had one or two when I was pregnant and then I only smoked when I was stressed out at work and that's about it (003 - P9 S)... I used to smoke a lot. That's a stress release right here and it's better than doing drugs and being an alcoholic yeah, there's lung cancer

and it's scary and whatever but it's better than being a crack head living on the street (003 – P14 S).

Category: Context of Tobacco Use

Servers' perspectives on the context of tobacco use in the hospitality industry are now presented to demonstrate the ways in which their experiences as servers influence their health behaviour. The findings from this study suggest that smoking typically takes place during work hours and again, immediately after work while consuming alcohol with co-workers. Servers considered their tobacco use to be low key and mainly social smoking. Some smokers did not wish to be defined as smokers and do not want their tobacco use well-known. In order to understand more about this context of tobacco use, I now describe the dynamics between the smokers and non-smokers within the hospitality industry. As indicated in the previous section, servers exist within a unique occupational community. There was a smoking camaraderie portrayed among smokers at work indicating that they have an even deeper and stronger sense of community defined by their shared tobacco use, social support and coping strategies. This may result because smokers have more opportunity to talk and vent at work while they are taking smoking breaks. Further, non-smokers recognized that they are not given this opportunity and as a result had a decreased ability to socialize with staff compared with smokers.

This additional socializing of smokers took place at work, while smoking outside behind the kitchen, usually in the alley and sometimes next to the garbage dumpsters. Interestingly, smokers did not give any negative perceptions of this, possibly because the ability to smoke at all on shift may be an advantage, regardless of the atmosphere. Non-smokers did find the smoking location disgusting and unhygienic. Smokers emphasized a

need for these outside smoke breaks to help them cope with their shift. They felt that they were always looking to their next break to cope with the stresses on shift. Non-smokers complained that they do not get access to breaks because they do not have a "legitimate" reason to go for a break: a need to smoke. The hospitality industry does not typically provide servers with breaks, unless it is to smoke. Managers who themselves smoke tend to facilitate staff smoking at work. Smoking was an accepted, behaviour performed on shift that allowed smokers to go outside where they have opportunities to engage in tobacco use and socializing.

From the information shared by participants in this study, it appears that smokers exhibit a more distinct control over the occupational community, and that non-smokers are a displaced and marginalized group based on the social disconnection caused by their lack of shared tobacco use and associated socializing. Based on my findings from this study, I believe that the control exerted by this dominant subgroup of smokers and the influences created by a "positive" smoking context, that is, the perceived advantages of respite and socialization not given to non-smokers, encourages both the initiation and continued use of tobacco among servers.

Theme: Servers' smoking behaviour

Socializing after work – smokers perceived combined alcohol and tobacco use as being common among servers:

Smokers:

[smoking] is really good with alcohol (005 – P11 S).

A couple of cocktails afterwards and I think the smoking too. It's harder now but back in the day, you know, servers were always having a quick puff whenever they could. You just get your nerves up so I think I smoked

a great deal, a whole lot more, when I was serving a ton, working a ton (001 - P11 S).

I don't smoke a lot on a regular day when I'm at school I probably only have one or two smokes a day but it's usually when I've had a couple drinks or if I'm out on the weekend or if like my boyfriend smokes too he works up north right now and whenever he comes into town and I'm around someone who smokes I'll smoke more yeah (012 - P7 S).

That's the one downfall of it too, you're making more money but there's always something to do no matter what if it's Sunday, Wednesday, anything like there is always staff that just got off and they're drinking martinis and doing this and that that's the hard part. Yeah, "(Name) just come and have one drink", you know, and then you're like, and sometimes because you've had such a tiring, exhausting night like with customers like, say you had this customer that was so bad you're like, whatever, I'll just have a couple drinks and then you're like, "Oh shoot, I have school tomorrow" and I have to like, probably halfway through my first drink it just hits and ok I start smoking (013 - P12 S).

[smoking] you have to have it for your after work beer and when I get home I maybe have one or two unless I have a few more drinks they go hand and hand those kind of things (010 - P16 S).

Smokers considered their tobacco use at work to be low key mainly during work, usually on weekends and most often defined as social smoking:

Smokers:

I think I smoke more at work because other people smoke too, and you could never sit down and just smoke a cigarette and be done with it, it's four puffs and you have to get back so it's ongoing (001 - P11)... Obviously an addiction, but I gotta tell yeah, you've billed your last table sure you've got a bit of clean up to do but you just get to lean against the building and just have a quick puff (001 - P13)... You get a quick breath of fresh air, seriously, like not, ok, tobacco's bad, but I'm just saying you get to be outside for a second or two (001 - P15 S).

I get to work and it's like, "Oh, I need a smoke". It's the other people that influence me I think, like they're smoking, I'm, "Oh ok". I think it's the building - as soon as you walk in and see other people that you know smoke you're like, "Oh I think I want a smoke". Every single person I work with is a non-smoker and as soon as they get to work they smoke so we all smoke together! (003 - P11 S)... I can go out one night and drink, I

go out with [partner] all the time and drink and never smoke but as soon as I get to work I'm like, "Oh, let's have a smoke" (003-P10 S).

I am a like a weekend smoker, a social smoker yeah I guess (005 - P1 S)... I'm smoking more because most people smoke in that industry (005 - P7 S)... I think I'm just trying to think if I did smoke when I wasn't working and no not really like, I don't smoke at home really and now when I was only working one shift a week I pretty much only worked on Fridays and Saturdays sometimes but definitely, when I get to work I crave cigarettes, it's automatic (005 - P8 S)... I smoked yeah, I did, I used to be a regular smoker when well probably like eight years ago where I'd smoke first thing in the morning kind of thing, but then when I met my boyfriend I just slowly stopped kind of smoking and now I smoke when I drink or when I work I do sometimes smoke during the week and I'm trying to think if I smoked when I was working full time regularly, it was mainly just at work (005 - P8 S).

like the other day when I went there all of us went out on Friday night I think it was and I had a couple drinks and I really wanted to smoke so I kind of hid in the corner of patio and had one and like ten people that work there were like you smoke you smoke so it's was kind of like (012 -P9 S).

Theme: Smoking camaraderie exists among staff

Smokers enjoyed socializing while smoking at work:

Smokers:

I think sometimes they [non-smokers] were just jealous of the camaraderie right because there is quite a few people that smoke and it looks fun standing out there chatting (001 - P13 S).

Sometimes not always, but yeah, I'd say half and half go with others or by myself (005 - P9 S).

Sometimes if somebody sees you goes out there and then they're like, "Oh, I just saw (name) go out for a smoke" and then people jump out and say, "Hey, give me some of that" you know (013 - P11 S).

Non-smokers reported the unfairness of smokers having this opportunity:

Non-smokers:

They definitely have fun, they'll grab a Cook and they'll go you know and that's when it kind of sucks for those people that don't smoke because they don't get to go sit on their butt, sit and smoke and just relax for five

minutes and be like, you know, talk about something completely different other than work, and just kind of get your mind off. They get that minute to sit and relax and do whatever, but I think they enjoy it, definitely. (009 – P17 NS).

Sometimes some of the kitchen staff if they see a manager or server go out they'll go have a smoke together (006 – P16 NS).

I could see how why they go, they get talking about stuff when they're out for a smoke and its just like, take a happy pill kind of thing, they vent when they get out there (008 – P18 NS)... Its hard to get the ability to get separated from everybody else, so once you're out there of course things are going to come up. If I was a smoker I would be going out to smoke and talk about things that are bothering me for ten minutes great, and nonsmokers don't get to do that in a shift, so I can see how it would be a little more, 'cause you know how the smoking crowd is a more catty kind of group and when they go outside they get to talk about things. I can see how I would want to do that - have a little camera out there about that so if something is pissing us off we can't talk about it (007 – P18 NS)... That's what I'm saying, we can't be like, "want to go for a smoke"?... so that's great for them with their cigarette, they get to talk about things and have their little nicotine fix and we're all, "God, I need to talk to someone, I'm kind of pissed off right now" (008 – P18 NS).

Theme: Smoking takes place outside the kitchen doors, sometimes in an alley

Smokers were not concerned with the area in which they smoke:

Smokers:

(we smoke) outside, around back by the kitchen doors. (003 – P12 S).

We just go outside into kind of the alley like, keep the door open so that we're not just by ourselves standing in the alley. It's all lit and stuff like that but we just kind of go into the back room that's connected to the alley (005 – P7 S).

Well, when I worked there it's always been non smoking restaurant since I've worked there. Where we have to go is our garbage pit where we throw out the garbage out the back door and it gets shipped off to the dumpster, we just put it out the backdoor so is out of the way and then it's easier than putting it all together, but we got some chairs out back that are hidden behind a gate and yeah, we're out the back door having a smoke (010 – P16 S).

Non-smokers commented that the smoking location was unhygienic:

Non-smokers:

Because it's a resort there's actually a villa that is for staff and so a lot of people who work in the resort, not serving, they go there to smoke. Obviously, if you're serving, you don't have enough time to go over there, so they go around back behind the kitchen usually. (004 – P8 NS).

It's in the back door of the kitchen (006 – P16 NS).

It's nasty out there like, our cooks door by the garbage and whatever, it's gross (007 – P9 NS).

Out the backdoor by the garbage, I always laugh how desperate can you be to sit out there? And there's a table and chairs out there, out there in the cold by the garbage to have a cigarette. Especially, I don't want to sound mouthy, but that's how desperate they are that they would go out in the cold next to the garbage to have a smoke. Usually, two or more you know, sometimes you peek out the door because you're looking for someone that you need and there'll be four or five sitting out there (008 – P19 NS).

Outside its gross, it's our garbage grease pit area. Sometimes there are mice out there and all the boxes and the garbage goes out there and we actually have a buggy for the dishwasher to put all the garbage in and the kitchen guy/buggy's it out because it's quite a walk to the big dumpsters so he's gotta load it all up and go out there so they've got the buggies and the garbage that people have thrown out in there from the day waiting for the dishwasher to take it out and they're out there. We got the broken ones out there or they've got a couple patio chairs out there, the plastic ones that have broken in spots. It's funny when it rains, they bring cardboard boxes switch the boxes and put it on the seat so they can sit down. It's pretty ghetto out there it's just all around nasty. (009 – P17 NS).

Theme: Smoke breaks

Smokers used smoke breaks to help them cope with their shift:

Smokers:

Breaks at work too, it's nice like if you get a break to just go outside and it's quiet you don't have to listen to anybody for a second and have a cigarette (013 – P8 S)... There's so many that I didn't even know that smoked and they're like, "Hey, I'm going out for a smoke" if they're on their break or something and I'm like, "Whoa", but a lot of them I think just have smokes, just for like, on their breaks at work or just but not

always, but I think just once in a while when they need one. I think so, I'm not sure because I don't know what they do outside of work, but I know like there's a couple that don't smoke that I didn't even know that smoked that just do it once in a while a work (013 - P13 S).

I will have a smoke and then I have a smoke on my first break, this morning I had like 3 during my half hour break, and then the rest of the morning I'm working away and about, see what time did I get back from my break, about 8:15am and then I worked until about 10:30am. I looked at the clock and said, "Hmm it would be nice to go for a smoke", then I got slammed super busy, not a chance, so as soon as I was able, one of my managers was seating me and she noticed I gave her the evilest glare 'cause it was just kind of a slam right there and it was about 1:30pm before I got to go for another smoke and then you work yourself up with a temper tantrum, "Oh, I can't have a smoke rahhh" only the people who know that I'm kind of sort of kidding I can do that with I can't do it with my customers, "Oh, I'm just running out for a smoke" yeah (010 - P15 S)... Smoking is for breaks for me, after work, of course, you have to have it for your after work beer and when I get home I maybe have one or two unless I have a few more drinks they go hand and hand those kind of things (010 - P16 S).

Unlike smokers, non-smokers did not get breaks because they did not have a "legitimate" excuse to leave the floor:

Non-smokers:

They [smokers] get more breaks (004 - P8 NS). [Smoke breaks are usually about] 10 minutes, but really, we're supposed to get breaks but we don't (004 - P9 NS).

So they'll take just a quick few minutes when they can to go out and have a smoke so it's kind of like your preference, people are not really bad about it, but if I can go to the bathroom for a sec I can just go, it doesn't bother them as long as I'm not long but generally the girls if I'm in the bathroom and my section gets sat someone will greet them and bring drinks for me and then let me know when I come back and have a table and they want this this and this (006 - P18 NS).

Well, I find my personal opinion of smokers is they follow with in the sense that because at our workplace if they can fit in a break for them or they will get to take a few extra breaks so they can go out the back and have a cigarette, so that way I mean, I don't have a problem. I suppose if I needed an extra few minutes I could ask but you don't feel like you should where smokers have no problem (008 - P18 NS).

It's hard to get the ability to get separated from everybody else so once you're out there of course things are going to come up like, if I was a smoker, I would be going out to smoke and talk about things that are bothering me for like ten minutes great and nonsmokers don't get to do that in a shift so I can see how it would be a little more cause you know how the smoking crowd is a more catty kind of group and when they go outside they get to talk about things I can see how I would want to do that have a little camera out there about that so if something is pissing us off we can't talk about it. [maybe clean air breaks] You know what, maybe I'll ask for one next time. I want to make sure I don't start laughing while I say, "Can I have a clean air break?" and I bet they'd start laughing at me when I said, "Yeah they get to go, yeah why don't we have that why isn't that accepted?" I'm going to do it you know, I am (007 - P18 NS).

As a non smoker, I don't get all these breaks and a lot of the time they don't punch out and that's when I think its unfair they're going out I'm watching their section or somebody else is watching their section because they need to go out for their smoke... I don't get paid to go sit on my ass for five minutes just because (009 - 17 NS).

Smokers did not believe that their smoke breaks were a problem for non-smokers:

Smokers:

[non-smokers don't get breaks] I don't think that's true no, but really three minutes is all that you'll take and there is lots of time where you wouldn't be able to take it at all (001-P13 S)... [To non-smokers] "You're gonna have nothing to do probably just as much as I'm gonna have in a course of a work shift" (001 - P13 S).

[Non-smokers are] ok. Some of them if they see that I'm starting to get annoyed then they're like, "Maybe you should go for a smoke just to calm down a little bit" You come back in well, one of the guys I work with he's like, "See, I knew you needed a smoke you're smiling now you're happy now" (010 - P17 S)... It's the non-smokers, what I basically do I make sure my section is fine before I go out for a smoke you know if someone is not too busy I ask them if they will watch my section and you know, normally people I work with are quite ok with that. They prefer to see me have a cigarette than not happy. You don't want to see what happens [if I don't have one] that's right (010 - P18 S).

I find that I was drinking more it was becoming such a habit and also smoking more because most people smoke in that industry and the only time you can get a break is when you can run to the back and have a smoke. Like the non-smokers don't really, at least in the places I've

worked there's, you can't really give set breaks in that industry because it's usually busy the whole time or whatever, so the non-smokers don't really have the time to just kind of go and sit and chill out for ten minutes. [Non-smokers don't get a break] because they're being healthy (005 - P7 S).

Managers who smoke tended to provide opportunity for staff to have smoke breaks:

Non-smokers:

All the managers smoke, so sometimes it's frustrating for me if it's a slower night and they'll sneak out and have a smoke when you actually need them it's like, "Well, where is (name)?" you're looking around and you're like, "Where are they?" so you have to go in the back outside, "Hey, I need you to come do this for me" and go get them. That's the only time I think it really bothers me. Some coworkers, they won't ask for anything from you unless it's really slow and you share a section or something or your section is right beside their's and you have a few tables and you'll say, "Hey, I'm just going to go out for five minutes have a puff, can you watch my section?" you know, and or, "Come get me" so they, usually they're polite about it. They ask you know, to have a quick smoke so you watch and doesn't seem like much they go and come back (006 - P16 NS).

Management sometimes sends some people out and I think that like all the management 'cause they're smokers, so they feel for them. They're like, "Oh, I know you need a smoke too" you know "Go have a puff" and a lot of time if they just run out and have a quick puff yeah, they're taking five minutes (009 - 17 NS).

Smokers:

Well, they smoke, like, my manager smokes and the other manager who happens to be my sister also smokes. Yeah, well she wanted the job, I didn't (010 - P15 S).

Just about all the servers smoked and we all smoked on the patio and we were allowed to smoke whenever you wanted to, as long as it wasn't interfering with the job you were doing, our managers didn't really mind. Or as long as you weren't having a smoke every hour kind of thing right, you work a 6 hour shift, you can have two smoke breaks or something that was fine (012 - P10 S)... I think if they did smoke, they would maybe have a smoke here and there. They didn't smoke tons one manager there did smoke like (012 - P11 S).

Depends who is management on shift (013 – P8 S). That's probably more it and then sometimes like, it depends, if I'm like, "Can I go outside for a quick smoke" either most of the time, they'll be like, "Just go have a smoke, just make sure somebody is watching your section" You don't have to punch for a break or anything, I know a couple of [managers] used to smoke so they know what its like, one of them doesn't, always gives me a hard time (013 – P9 S).

Category: Tobacco Control

In this section I present support for my conclusion that the hospitality industry is a very social environment that promotes tobacco use for young adult women as a way to handle the stressful nature of their occupation. Tobacco control for this group is very difficult within this context. Non-smokers, as would be expected, wanted non-smoking work environments and fellow staff to quit smoking. Smokers have attempted to quit but find their job a significant deterrent for change and justify their continued smoking as an insignificant and necessary behaviour at this time in their life. Regardless of their efforts, the stress and need to cope on shift was facilitated by their ability to access smoke breaks. Despite their desire to prevent smoking at work, non-smokers became enablers on shift as a result of trying to perform and deal with their smoking colleagues' struggles to cope during high stress periods on shift.

Theme: Staff members have a negative perception of tobacco use

Non-smokers disliked the smoking behaviour of fellow employees:

Non-smokers:

Everybody hates smokers now (002 – P9 NS).

I've never smoked and I did work at this place I knew I'd hate it at a bar a little place called (Restaurant) in Edmonton and I worked maybe two shifts and the employer was just scatter-brained and the people were so catty and the customers were rude and they had a smoking area and I thought it was regulation to have smoking inside they had a section blocked off but the door was open. I shadowed one shift for like two hours

and I was like, "No". We don't have smoking in our (Restaurant) anymore. It used to be in the front of ours and you can just tell it's been years since they haven't had it, but it's like embedded into the chairs and the carpet and the walls (007 - P3 NS)... If you're a smoker and you're serving, you don't even have time to ... I don't even know how they manage to do that. I almost feel bad for them, they run all the time. They might go every two or three hours, but when used to smoking every hour, so, I think that's like me not going to the gym for four days I get really irritable, I can tell my body really reacts when I don't go and maybe not even going to the gym but not being active I need to at least go for a walk or something or I feel so horrible and bite people's heads off (007 - P10 NS).

The one thing I really hate about my work place right now is that I have to work out on the patio and its an enclosed patio and people smoke like crazy out there and I'll probably empty like 150 ashtrays a night and as a non smoker like I just feel so disgusting after like I stink I'm inhaling smoke and cigars like all night (011 - P NS).

Smokers did not like to smoke, they were aware of the dangers and the perspective that smoking is disgusting, stigmatizing behaviour:

Smokers:

It's expensive, look how much it costs now, it's hard to bitch to go out and buy a jug of milk when you're a smoker, you kind of feel selfish (001 - P12 S).

Well, I think that now that you can't people, servers, would still go out for a smoke and I think that there is more awareness as to the dire effects of smoking, I don't think that once it was non-smoking in pubs and such and restaurants. I think it is more about the fact that the price is going up and there's more people. The trend now is to not smoke as opposed to way back when the trend was smoking makes you look cool (010 - P15 S).

No, I don't think I look cool when I'm standing in the alley smoking cigarettes that's for sure. It could, it definitely makes it more noticeable when you go out for a smoke and you come in you stink. So that's something I'm really conscience of. I make sure I wash my hands and chew gum or do whatever I can because that's really gross to walk up to a table stinking like cigarettes. No, it's definitely not looked upon fondly, but I think that obviously the smokers are a little better about it than the nonsmokers, but I don't like people seeing me smoking while I'm working and I don't like people knowing because its kind of gross (005 - P11 S).

Theme: Work environment influences quit success

The work environment can make it difficult to quit smoking, mainly as a result of being around other staff members who smoke, access to breaks through smoke breaks, and the work-related stresses on shift:

Smokers:

I also found that it was hard to quit smoking for that reason [smoking at work] and also when you get really busy and then crave a cigarette and then it's really nice to go out back for ten minutes to have that break and a smoke (005 – P7 S)... That's why that's definitely one of the reasons why I was going to quit [serving] and come back to school, because I just didn't really like the effect it was having and then, like I said, before with the sleeping and stuff like that it wasn't very healthy. I want to go to bed early and get up early and drink coffee in the morning and feel good (005 – P8)... I definitely will cut down more, I do still [smoke] if I have a drink, then I crave a cigarette right off the hop and it still has a total hold on me even though I rarely do it and it's not just it's certain circumstances you know, but, I know I should just quit all together and its silly, but I definitely think not working on Fridays will keep me from smoking. [Partner] was kind of a casual smoker when I met him, but he just slowed down and stopped and he's not really hard on me or anything but he doesn't like it and it grosses him out, and obviously I know it's bad for my health and I would just hate for me to get sick and it be because of that and I would hate to do that to him, so I'd I try not to smoke around him and again, its usually when I'm out in a social setting that I do it, and only when I'm around smokers too. I can be out in a social setting with non-smokers and not really smoke so (005 – P9 S).

When people are smoking around you and you're craving a cigarette and you're clearing ashtrays, yes it's tempting (001 – P11 S)... I haven't heard of anyone who actually quit [while serving] (001 – P15 S).

It's not even just stress it's just I don't really feel like it now, I did for three months and I totally quit and I don't even know why I started again I think it had to do with work actually and I bought a pack and there I was [smoking], whatever. (013 – P11 S).

It gets kind of hard, I try not to stress about it though that's also why I'm having hard time quitting smoking when I come back to work, I miss my 5 minutes outside alone away from the noise the chatter to just go and sit down and have a smoke (010 – P6 S).

I like to be able to sit down, and this is a funny thing, I've decided at the end of the month, I'm going to try my best to quit smoking and this time I'm going to go cold turkey and I'm hoping while it's slow I'm hoping that I can quit. Well, and actually, I've gotten this book that says that smoking isn't going to help with stress you're not going to it's going to add to it if anything right so (010 – P14 S). I only made it halfway through, I quit for a week and I was good, I found that I didn't get stressed, unnecessarily stressed, because you're trying to get out and stop for a smoke, whereas if you're not going for a smoke you don't want to stop you want the time to fly right so that's the difference and I'll be happy if that happens, because then it means I can be as busy as I want. I'm ok with that, and I tried the patch. I tried many times with the patch but see, what I've been told is that nicotine after 45 min of having a cigarette you crave another one and that craving doesn't go away but it lessens as you go further and further but, it's mostly in your head that you're like, "I need it, I need it" and you'll work yourself up and it's all yourself doing it (010 – P16 S).

Smokers recognized that they should quit but justified their smoking as necessary at this time in their life and that they smoke only a small amount:

Smokers:

I mean, I really want when I moved, I really wanted to try and quit smoking and the with school and working all the time I just really like, it it's like my only salvation sometimes, you know, to just stop for a minute and I just know I do want to quit. I don't want to smoke, and I don't smoke that much, which I think is good, like, I've cut back tons from I used to smoke, like 5 to 10 a day and now it's 1 to 2 a day on average on weekends, maybe a bit more, but and I just know that now is not a good time to quit because it would just be too much I think. Of course, I'm kind of like, "Whatever" right now. Maybe when I get things all settled down and get a decent job and weekends off and some time to relax then (012 – P9 S).

It's not even like [smoking], I don't know why, it's not all the time, it's not a constant in my life. I'll go away for a visit and not even think about it and as soon as I get to work, it's like, "Oh, I need a smoke" (003 – P10 S).

I don't know, everybody picks and chooses, if you're going to get on a motorcycle and rip down the road, then that's your death wish. Mine is to enjoy smoking right now (013 – P13 S).

Non-smokers felt frustration over smokers' quit attempts at work:

Non-smoker:

They go up and down and they have their little, "Oh I quit, I quit don't ask me for a smoke" and it's funny, and then they get all pissy and they go out for one. You know it never lasts. Oh, if they say they're quitting, I'm like, "Good for you, awesome". I'm like "Good, I'm glad to hear it 'cause" I'm like, "It's nasty". I'm always just the negative one, anything to be negative, yeah that's what I do when they come back I'm phew (Name) I'm like "wholly smoke or -----oh my God, I'm like wow you need a tic tac" (009 - P17 NS).

Non-smokers felt frustration with smokers' negative behaviour on shift and facilitate their smoke breaks even though they do not want them to smoke:

Non-smokers:

Yes and no because sometimes their attitudes change, like (Name) I shouldn't be using her name but I am. She well, the smoking people not just her, there's a couple of them that if they haven't gotten their smoke they just start losing it and they are, you know, f-this and f-that and they're swearing and they're in the back and they've got that mood around them and it just kind of lets off onto everybody else and everybody else is kind of like, timid, saying, "I don't want her to snap on me" and [we say], "Go out for a smoke okay, just go for a smoke", and I've gone to management and I've said, "You know what's (Name)'s problem?" or "what's such and such's problem because they need to go out for a smoke" or something or, "They need help". I don't know. They're not asking for it they're freaking out they're like, you know (009 - 17 NS).

They need it, we have people there that are so stressed out and if they just go have a smoke, in fact somebody will say, "Why don't you just go have a smoke?". They are not easy to work with because their stress level is unbelievable, and I never really thought that was such a problem, but they have a few people there that can will start to unravel if they don't have a cigarette and it shows in their work and that effects you too because, all of a sudden, they're agitated and you know and well I don't even call it, they're making mistakes, but once they get agitated, they're are past that point you know, that nervousness, that edge of patience right? You know all of a sudden, they start to fall apart, and a few times I've gone up to my boss and said, "Well, you know what, maybe I should take over for this person because they're really starting to lose it" and the boss will say, "Well, you know what, take over them so they can have a smoke, that's really what they need, is to go have a cigarette" and she's smoker too,

obviously she knows, I don't understand the addiction but obviously its very bad if it effects you in that way (008 – P19 NS).

Theme: Servers support current smoking regulations

Non-smokers wanted non-smoking work environments:

Non-smokers:

Some customers were PO'd, some servers were pissed because they didn't think they'd make as much money. I hate smoking and I have an allergy so I was like, "I can't wait [for smoking regulations to start]" It's been so nice working in non-smoking environment, I remember being at (Restaurant) and people are like, you're at a booth and they're smoking holding it up in your face and looking at you blowing it at you (004 – P2 NS).

There's now all non-smoking. We had one small little smoking room, like section there before and everybody hates smokers now too, so on the terrace too at (Restaurant) you're not even allowed to light up on the property cause you can see all the fires too, so there's no fire at all allowed, no smoking around. Everybody hates the smokers, everybody hates working in the smoking section, when the girls 'cause its only one section in the bar, and you can't smoke anywhere in the restaurant so the girls would have to work in the lounge in the bar in the smoking section they were always like [unhappy] (002 – P9 NS).

They should really be encouraging people NOT to smoke that's one way that I'm really happy the government finally stepped up and said no and stopped encouraging it (007 – P9 NS).

They are supposed to have ventilated areas but a lot of places like say (Restaurant), everyone stands outside at least in the summertime in the patio or where the bouncer is which is right at the front door and the smoke is there as you come in and travels into the door and hallway there and if you just walk outside its like wow (004 – P9 NS).

Category: Life Transitions

Servers, aged 19-24 years and smokers (n=7), described connections existing between their social roles and their occupation. This period in life was defined by these young adult women as an opportunity for new experiences, making new friends, starting to work and studying for higher education. This lifestyle can be stressful and draining,

but great for a short period of life before moving on. Smokers perceived the connection between this period of life and tobacco use as an increased opportunity to drink, smoke, and eat unhealthily associated with their serving occupation: An occupation associated with high stress, socializing among staff and marginality from the public they serve. More experienced servers, aged 30-35 years, found the work harder and more tiring after serving for a few years. They believed that, based on their experiences in hindsight and what they see now, that younger servers just starting out are at risk for negative health behaviours. Most significantly, the younger servers are vulnerable to experiencing the night life and transient lifestyle associated with being a server: easy money, fun atmosphere, socializing, and experimentation with alcohol use, substance use and tobacco use. A temporary lifestyle with high risk health behaviour that unpredictably can become permanent behaviour in the long-term.

Theme: Temporary lifestyles

Servers, aged 19 – 24 years, smokers, experienced first time serving in young adulthood associate their position, as temporary, with new beginnings and making new friends:

Smokers:

I think is really good for when you're young in your twenties mid-twenties, working at this job, trying to get things started in your life because I don't know, it gives you so many experiences too, you deal with so many different kinds of people and you learn how to work hard, also even though I've had jobs that I worked hard at before that anyway (013 – P14 S)... I don't think when you're older, like right now I think its just perfect going through school and you're young, because I've made so many friends from working, there. All the staff are brand new friends you know. Everybody is so close and you just meet so many people and hear so many different stories from customers and its just a really good experience when you're young and you don't want to work nights eventually, you're going to be like, "I wish I had nights to myself" and on the weekends especially, but when you're young you can do it, so it doesn't matter. (013 – P15 S).

I would never recommend it as a career, its definitely good when you're young and going to school and everything, but I think there are a lot of people that get sucked into it as a career because it's such easy money, and I mean if you work full time serving, you don't have to work that many hours and you're still making as much money as somebody else who has a profession sometimes right. Like if you are making great tips, if you make at least \$100 every time you go plus your hourly wage and you're 6 hours a day 5 days a week you're making more than like a teacher, yeah with less hours, exactly so it's kind of like, "Why not?" Like I have a lot of friends who are in that trap right, and they never wanted to be like that, so that is the reason why I never wanted to be a server, but it can be really stressful when its busy and it can be draining like, it can take a lot out of you because like sometimes (012 - P10 S)... I'm super tired at the end of my shift but it's ok, it's not something I would do for the rest of my life but its good for right now (012 - P1 S)... I like it for right while I'm in school. It's perfect because it's short shifts, it's easy money. I can have a good amount of money without taking too much time away from homework and studying and school time and all that (012 - P12 S)... I think the thing with smoking and serving, the real connection, is that when you serve you usually have a better night life. You go out more you drink more and you smoke more and, you know. There's more opportunity to go out, there's more opportunity to drink, there's more opportunity to eat bad, right? So it can, you can turn into a bit of a slob if you're a server, I think that's for sure, but I mean it depends on the person if they're going to be healthy they're going to be healthy no matter what job they have. But there is more enticing you in that environment I'd say (012 - P13S).

[Serving] was never something that I'd planned. No, my first job I went in my mom was a waitress and she was working at kind of a fine dining place and I was supposed to go in as a hostess and then they just got really busy and they threw me on as a server and I'd never served before and then after that I just liked the tips. So I got jobs with tips, but I always, but I went straight into college after high school and I always planned on having a different career (005 - P6 S).

Both groups, (aged 30-35 years), reported the hazards of young adult life transitions in the hospitality industry. Serving was perceived as a temporary job with increased opportunity for alcohol consumption, tobacco use and unhealthy lifestyle:

Non-smokers:

At the beginning, you know what, I'm really obviously more brand new to it so it was almost exciting like every day was a competition you know?

Like in your own mind, you try to see how well you can do. If you're super pleasant today maybe that would reflect on your tips or whatever but after years some days, honestly you don't even care. I used to get the tips like, you know, sometimes you're just not ready to go that extra, you know (008 - P4 NS)... You've got a lot of young girls that probably never have served before coming in there and they really don't know the whole, you know (008 - P8 NS).

Smokers:

Drama all the time, because you have people that basically, if you work in the restaurant, nightclub, whatever industry, you're dealing with younger people, usually (003 - P2 S)... They've just moved out, they're newly... whatever and this is their first real job where they're making good money on a constant basis and there's drama, there's always drama because when they start you know, I don't know what it is, they start drinking, smoking, being ridiculous, drugs whatever and it's always insane, it's always the same everywhere you go, always. I've worked in the restaurant, nightclub industry and it's all the same, it's the crazy schedule, it's the everything and people who didn't have all these bad habits as in drinking and smoking and doing drugs and now all of a sudden they do, it's all follow the leader (003 - P2 S)... The one thing [young servers] don't realize is the age thing, they don't want you when you're 40, they want the "up and coming" (003 - P3 S)... And most of them drop out of school because, for one thing, they don't have to go to school to work, you don't need an education ...I was going to school two degrees and I do nothing (003 - P4 S).

I think I'm a granite porch now (001 - P5S)... It's great to do as a young person as far as making some money, learning a little bit of discipline but hanging out and having fun but I wouldn't do it past that. If I had to do it over again, I would only do it for high school, college years and that's it, then drop it, listen to your body when it tells you to stop you should stop. I think there's kind of a mafia aspect of once you're in, you're in. I think that if you're fortunate enough to get out you'll never go back. Like, you might hostess and serve a couple of tables and never go back, but I think once you start serving, it's just an industry that sucks you in and you know, easy money to some degree. Quick money, you can go to school and work crazy late shifts, when other businesses are not open so I think a lot of it is easy hours that you can get at weird times (around your other life).

Summary

In this chapter, the participants' concepts and ideas were presented within seven categories and 16 themes. Quotes were included to provide servers' perspectives on their occupation, health and tobacco use, and a phenomenological analysis was outlined. This analysis represents a collection of shared lived experiences of a subgroup of women presented as a narrative of the social and environmental context of young adult women in the hospitality industry and the relationship between young adult women's environment and tobacco use.

Chapter 4 Discussion

This thesis used a phenomenological approach to describe the lived experiences of young adult women in the hospitality industry. The analytic approach was based on Giorgi's (1997) psychological phenomenological method of analysis and Smith's Interpretative Phenomenological Analysis (IPA) (1995; Smith & Eatough, 2006). The purpose of the analysis was to examine the associations between serving, (i.e., workplace characteristics and occupational community), stress, social roles and tobacco use for women. The research questions were as follows:

1. What are women's perspectives of serving in the hospitality industry?
2. How do women who serve perceive serving in relation to their health and social roles (i.e., parent, partner, university student, and employee)?
3. How do women who serve describe stress? Do they associate stress with their roles?
4. How do women who serve describe tobacco use in the hospitality industry?
5. Do women who serve associate stress or social roles with tobacco use?

The results are discussed in relation to the current literature. I present the social and environmental context in the hospitality industry and how it establishes the lifestyle engaged by young adult women working as servers. I argue that not only is there a relationship between the environment in which these women find themselves and the prevalence of tobacco use in the industry, but that there is a difference in how that relationship is experienced dependent upon smoking status. I conclude with summaries on the significance of the study, implications for health promotion, limitations of the study and future directions for research.

Social and Environmental Context of Young Adult Women in the Hospitality Industry

Workplace characteristics. Work environment, money and people-work are key factors in how young adult women experienced their serving occupation. Servers emphasized the fast-paced, high stress, high demand, constantly changing but fun environment. This perception is consistent with other research showing that service occupations are competitive, fast-paced with unexpected high levels of job satisfaction based on the lack of skill and low pay described for servers (Sandiford & Seymore, 2007). There was a significant burden of physical labour and fatigue that servers reported experiencing which resulted from carrying weight, being on their feet, and working atypical hours. These results were consistent with other research showing that serving and shift work are associated with these strains (Johnson et al., 1991; Bayard de Volvo, 2003; Knutsson & Nilsson, 1998). Despite the negative physical effects, tips were the main motivator for serving and also the main reason for not quitting. Participants repeatedly stressed that tips were associated with being unable to make the decision to leave the hospitality industry. This account is similar to Bayard de Volo's work with 20 to 30-year old cocktail waitresses, showing that they describe serving as the most lucrative option for women requiring entry-level, low-skill work.

In this study, social interaction and exposure to interesting people were motivators to serve. However, consistent with findings reported by Sprout and Yassi (1995), servers can have an issue with low control when interacting with clientele. This issue increases with their level of needs or demands associated with engaging in people-work, the interaction between servers and customers, where the server must place others' needs repeatedly before their own and in a positive manner (Williams & Kurina, 1998; Sprout

& Yassi). This daily engagement in people-work influenced servers' experiences of emotional labour.

Servers in this study expressed the need to represent feelings for work that did not coincide with their true feelings. Servers perceived components of emotional labour as described by Mann (2004) including: faking emotions that are not felt (i.e., pretending to be happy); hiding emotions that are felt (i.e., resentment and frustration); and managing emotions to meet requirements of the job (i.e., manage emotions and behaviour to deal with changing moods of co-workers and customers). This continually forced act of displaying socially desirable emotions to accommodate the needs of customers and co-workers influenced servers negatively (Hochschild, 1983; Brotheridge & Lee, 2002; Hall, 1993). Servers worked in a close environment, vulnerable to other co-workers' and customers' moods and emotions that influence their experience of stress. Emotional demands from their service work appeared to be significant because they described having to respond to a client's needs, emotions and behaviour while remaining calm and smiling (Messing, 1998; Hall). Overall, servers perceived the opportunity to meet interesting people worth the frustrations of trying to make them happy.

Occupational community. An occupational community consists of people who are members of the same occupation, have a common sort of life experience, and are to a degree separate from the general public or society (Salaman, 1974). Servers were in an occupational community defined by their shared service work focused on people-work and the subsequent emotional labour they experience. Servers also had shared life experiences, such as attendance at university or college, which influenced their sense of community. Marginality is key to the development of an occupational community, in that

members believe they are misunderstood or undervalued by those outside the group (Van Maanen & Barley, 1984; Salaman, 1974). In support of this, findings from this study suggest servers preferred to associate with, and make friends with co-workers, felt that they were outsiders from the public they serve, and associate their occupation with their self image.

I argue that within the server occupational community is a sub-community of smokers. I demonstrate that although smokers and non-smokers shared similar perceptions of their occupation, they had further marginalized feelings around tobacco use that set them apart from each other. Mainly, smokers' enjoyed an increased social bond with other staff that non-smokers did not: a community of smoking camaraderie, seen as a social support system that provided opportunities during smoke breaks, and socializing after hours both facilitated with tobacco use. Smoke breaks, supported by management, were perceived as a necessary event to cope with the stresses on shift. Non-smokers perceived these smoke breaks as unfair: a break they were not allowed in an industry that typically does not otherwise offer breaks on shift. This made it more difficult for non-smokers to socialize on shift and limited their ability to cope. They also contributed to others' smoking by seeing to the needs of smokers' customers while they were on smoke breaks.

The hospitality industry supported servers who smoke by allowing them to have smoke breaks, and by socializing through alcohol and tobacco use. Both smokers and non-smokers agreed that socializing and drinking with staff was encouraged after hours, however, smokers reported more frequent participation. Smokers also reported the use of alcohol to meet friends at a new job and reward other staff members for good

performance on shift. Socializing was seen as an opportunity for excess drinking. In contrast, non-smokers did not often socialize and perceived a disconnection between themselves and fellow employees. Based upon the findings in this study, I suggest that servers, particularly smokers, have increased opportunity to act as, and benefit from being in an occupational community because of the opportunities to socialize with each other during and after work brought about by their shared alcohol and tobacco use and their shared perceptions of reward and frustration dealing with the public or "outsiders".

Although servers' occupational community may be problematic for their health through excess alcohol use and tobacco use, I suggest that in this study the occupational community worked as a social support network helping smokers cope with their job (Sandiford & Seymore, 2007). Social support is thought to be a buffer and positive coping strategy for reducing stress, decreasing negative health behaviours and consequently promoting women's health and well-being. The social support established within the server occupational community was likened to Hochschild's (1989) proposition that a social support outlet consists of individuals with whom a woman spends the most time with, and thus, in the case of employment, fellow employees may possibly offer the strongest social ties. The main issue with these social ties was that for servers who smoke, their social support network encouraged by the hospitality industry actually increased negative health behaviour instead of decreasing it.

Social roles. The findings of this study suggest that young adult women commonly occupied two social roles associated with being a server in the hospitality industry: being a student ($n=7$) and being a parent ($n=3$). These results support the conclusions of Bayard de Volvo's (2003) study which showed that there is a range of

women serving, including those financing college or university and young adult women just starting employment. Previous research indicates that shift work can also disrupt a worker's social life and cause family relations to suffer and is often associated with increased tobacco use (Shields, 2002; Knutsson, 2003; Fenwich & Tausig, 2001). The servers in this study felt that shift work, although stressful, facilitated parenting roles, which allowed them to be home with their dependents and contribute to the household. These findings also demonstrated that for students, although the flexibility of a shift work schedule was advantageous for attending class and making money, at times shift work also increased stress during and outside of work.

Stress. Social accounts of the stress process propose that women's health risks result from social-environmental factors that influence the type of stressors to which women are exposed (Williams & Kurina, 2002). Stress affects individuals differently, depending on their perceptions of the stressor(s) at issue and their ability to cope. For example, an individual may utilize negative health behaviours (i.e., smoking) in an effort to cope with stressors (Williams & Kurina; Stellman & Stellman, 1995). I found that servers in this study experienced stress as an urgent sense of timing and constantly changing work environment associated with dealing with the public and co-workers.

Smokers coped with stress through physical activity, social support, alcohol use and tobacco use. While non-smokers also reported social support and physical activity, they had less opportunity as a result of not having access to the breaks enjoyed by smokers, and less participation in drinking after work. This reinforced the overall interpretation that although all servers identified with their occupational community, servers who smoked experienced a particularly heightened sense of social connection

with each other, further identifying themselves as an out-group in relation to non-smoking servers in the same occupational community.

Stress is also associated with university students experiencing a change in lifestyle, moving to a new location and increased responsibility (McDermott et al., 2006). Servers in this study perceived stresses related to balancing work and school. Workplace characteristics and balancing social roles were more common factors associated with stress, but the occupational community may work as a buffer for stress associated with positive social support and negative health behaviours. The link between young adult women's work, roles and stress with tobacco use will now be presented.

The relationship between young adult women's environment and tobacco use

Context of tobacco use. Results from this study indicated that tobacco use facilitates socializing and is used in an attempt to cope with stress among servers. This finding was consistent with McDermott and colleagues' (2006) report that young adult women use tobacco as a method to facilitate social bonding in both work and social settings. Similarly, the young adult women in this study reported that their work environments actually increased or decreased the amount the amount they smoked, depending on how conducive their workplace was to smoking (McDermott et al.). This study supports previous research by others that job characteristics influence smoking behaviour due to the high level of occupational stress associated with high physical and mental job demands (Sorenson et al.; Johansson et al., 1991; Knutsson & Nilsson, 1998). Further, Johnson & Hall (1996) found women's jobs, especially in a shift work or night work context, provide opportunities for social interaction during breaks that revolved around socializing and smoking behaviour. I conclude that findings from this study were

consistent with both of these concepts, that is, servers had a subgroup of smokers who experienced a social camaraderie, a social bond, that they believed buffered stress and provided social support during smoke breaks, and after hours with alcohol and tobacco use.

In this study, servers appeared to exert a great deal of effort performing emotional labour and socialized tasks. It is therefore not surprising that these participants seemed to be very social, personable people. Their ability to perform the skills required to be successful in their occupation and be rewarded with tips is a reflection of that characteristic. It is important to reiterate that these servers experienced an occupational community that allowed them to support each other and deal with their work stress. Further, it could be argued that within this occupational community, non-smokers were marginalized from the smokers and did not benefit from membership to the same extent. It appeared that non-smokers' marginality can negatively influence their work relationship with smokers.

This study further demonstrated the association between women's social support and reactions to stress as important influences on smoking rates and success in quitting, as suggested by Secker-Walker et al. (1996). It is understood that social support and reactions to stress may increase or maintain smoking rates and decrease quit success rates. Servers in this study perceived their work environment as a hindrance to quitting smoking, as a result of other staff members smoking, access to breaks only through smoke breaks, and work-related stresses on shift. On this basis, social support for servers could thus facilitate tobacco use and be a disadvantage for quitting. To further combat their attempts, non-smokers, although wanting their fellow workers to quit, enabled

continued smoking. Non-smokers encouraged smokers to go for a smoke break when feeling frustrated with having to deal with a smoker struggling with stresses on shift, or when having experienced negative effects of a smoker's moods resulting from their addiction. Non-smokers and smokers alike enabled tobacco use and cared for a smoker's customers while the server took a smoke break, whenever they heard the request, "Can you watch my section?" ; a request that, at times, instigated frustration and resentment in the non-smokers. These factors may have had serious consequences to a smoking server's ability to quit. It was also contradictory to non-smokers' professed support of non-smoking work environments and their encouragement of people to not smoke. This may attribute to the frustration that they feel as a result of smokers receiving smoke breaks when they themselves, do not have a "legitimate" reason to do so.

Although women find social support generally helpful, supportive interventions developed especially for smoking cessation have not been very successful, possibly because women with multiple roles have less opportunity or time to engage in smoking cessation programs (Stellman & Stellman, 1995; Milham & Davis, 1991). Servers in this study did not mention smoking cessation programs, only unsuccessful individual quit attempts. Their perceptions support the Stellman and Stellman as well as Milham and Davis assumption that servers, as a result of their constant management of time in a fast-paced, high stress work environment with the time constraints of social roles and shift work, would have difficulty engaging in a smoking cessation program.

Work/life balance: Temporary lifestyles and tobacco. Young adult servers perceived their job as a positive, but temporary, existence that focused on attainment of quick money, supported attendance at university, and placed great importance on new

experiences, and meeting new friends. The negative, but again temporary, aspects included opportunities for poor eating/sleeping behaviour, alcohol use and tobacco use. Servers who had been in the hospitality industry for what they perceived as an extended period of time, reported that young adults who serve are vulnerable to these negative health behaviours which can become a problem if they stay in the industry long term.

I support the theoretical perspective that emphasizes the interplay between women's roles and health: the *role integration model*. Young adult women in this study reflected on tobacco use, stress and satisfaction in relation to their multiple social roles as parent, university student, and/or employed worker and tobacco use. This may be understood in the context of the life transition from the adolescent to young adult life stage, which includes new freedom, rights, responsibilities and pressures. This study supported the perception that this life stage was a vulnerable period for the development and maintenance of a variety of health risk behaviours, including tobacco use (West, et al., 1999; McDermott et al., 2006; Colder, et al., 2006). I further demonstrated that young adulthood is associated with new opportunities, new experiences and new friends for servers in the hospitality industry.

Servers perceived there was a connection between this period of life and tobacco use based on the overall increased opportunity for tobacco use, alcohol use and unhealthy eating in the hospitality industry. Their smoking behaviour helped them manage the stresses in their work and life. As young adult women, servers felt this was a temporary lifestyle that allows for negative health behaviour. Later, they expected to shift to more positive behaviours when they are older with careers and families. Interestingly, this finding reflected similar perceptions of the tobacco industry that recognizes that the risk

of future smoking for young adults declines with age as a result of the transition to family life and/or careers and, until that phase begins, they are prime targets for tobacco industry advertising (Gilpin et al., 2005). This transition period makes this group of women more vulnerable because the tobacco industry also targets young adults in the hospitality industry, such as bars and clubs (Gilpin et al.). In fact, the tobacco industry already may be directing their target to those who work in restaurants. The period of life transitions for young adult women combined with their work in the hospitality industry makes a unique subgroup for high risk tobacco use and thus, important for health promotion initiatives.

Significance of the Research

In Canada, federal and provincial policies restricting tobacco use in public areas are gaining momentum. Previous research on the negative health outcomes of secondhand smoke for workers, in particular bar and restaurant workers has instigated awareness of this issue and provided the background for policy change. The tobacco industry continually fights against such policies by encouraging the hospitality industry to refuse to become smoke free. Regardless of their attempts, restaurants and bars are now smoke-free, improving the health outcomes of workers and their customers. However, there are still outstanding issues to resolve in some provinces, such as smoking on patios and other outdoor areas.

Besides addressing these outstanding issues, the overall assumption is that workers and customers are now safe. For the most part that is correct. When discussing this project, a colleague replied, "excuse me if I'm wrong, but restaurants and bars now all smokefree, so what would the need be to study servers smoking, are they not smokefree?" (Anonymous, personal communication, 2007). This brings attention to the

main reason for this study. The public assumes that they have taken care of the health of workers and their customers. Secondhand smoke appears to have been mostly managed. However, servers continue to smoke and in much the same way they used to, between shifts and on smoke breaks during shift. Current policy has moved smokers outside, behind the kitchen doors, in the alley, sometimes next to dumpsters. It is important to address their own smoking as well as preventing overall secondhand smoke. The majority of servers are young adult women and thus, smoking rates may influence subsequent negative health outcomes for women and their families.

Implications for Health Promotion

Health promotion strategies targeting specific subgroups must be tailored to address the shared social environmental context for a particular group. Previous research suggests subgroups, such as low income girls and women, have separate social and physical environments associated with certain risks and needs that must be incorporated in order to have successful initiatives (Greaves & Jategaonkar, 2006; Greaves, Vallone et al., 2006). Within the occupational community of the hospitality industry is a further subgroup or community of young adult women who smoke. Smokers experienced difficulties in quitting due to the context of tobacco use at work, including opportunities to relax and gain social support from staff during smoke breaks and after hours. Servers' smoking, supported by the hospitality industry, results in the marginalization of non-smokers as a result of having to deal with smokers' inability to perform or deal with stress during shift. Non-smokers experienced a desire for their colleagues to quit smoking but were frustrated over fluctuating negative mood associated with the need to smoke. As previously mentioned non-smokers often watched another server's customers so that they

could take a smoke break and encouraged them when they became intolerable to work with. This may have helped the server and improved the work environment in the short term, however, non-smokers and smokers alike, did not appear to recognize how their behavior (e.g., encouraging servers to take a smoke break to relief stress) may delay smokers' decisions to quit or hinder their smoking cessation attempts.

This study suggests that workplace awareness must be raised to address these issues in order to assist smokers in their efforts in tobacco reduction or cessation. First, servers and management should not encourage or facilitate tobacco use on shift. Second, new strategies for coping with stresses on shift should be attempted. This would require an ongoing input from the server community, their perspectives on what works and what is needed. Initial conversations about smoke breaks with study participants brought up the possibility of having "clean air breaks". A phase-out tobacco use policy could then be: (1) add clean air breaks so that non-smokers can have short breaks on the basis that smokers have been able have a 5-10min break without too much problem and in the hopes that smokers will try to have clean air breaks instead of smoke breaks and (2) move to only clean air breaks, everyone receives 5-10 min once or twice a shift. Promote healthy air campaigns for all entrances – similar to other smoke free barriers on institution and government property. Promote the idea of healthy atmospheres – inside and out – this could increase teamwork among non-smokers and smokers over underlying issues with smoke breaks, and allow socializing without the prerequisite cigarette as a reason to be outside. With this tobacco control policy, it may be possible for tobacco use at work to be phased out with time. The transient and high turnover rates of the hospitality industry as described by Ali & Avison (1997) could help ease the changeover.

Strengths of the Study

Within the phenomenological approach, young adult women participated in interviews that allowed them to reflect on their own perceptions of smoking behaviours, and facilitated the possibility of taking action to control smoking in their own life and the lives of others. The participants also felt validated about the service they provide: they voiced recognition of the importance of their occupation, being valued and undervalued as servers, being needed and useful in their service toward customers, strength in making others happy and comfortable and enjoyment in having fun (as presented in Hilfinger Messias et al., 1997).

Limitations of the Study

By conducting a phenomenological study, I recognize that the participants and I engaged in a mutually reciprocal relationship during the interview process and the results of this study are derived from the interaction of my subjective bias with the perspectives shared by the participants, that is, I present my own analysis. However, I have provided the details of the analytic process in order that readers may also participate in the interpretation and determine for themselves the accuracy of my own findings. The phenomenological approach used does not allow for generalizability but representation of the perspectives of thirteen young adult women. In my attempts to have trustworthiness in the data, I was only able to reach two of thirteen participants to confirm their transcript and my summary. Therefore, I have been restricted to an analysis of a verbatim transcription of the interview tapes to determine trustworthiness of my data.

Ideally, a second round of interviews could have been conducted, enabling further clarification and discussion with participants. However, this was not possible due to the

timeline and availability of participants. Trustworthiness could have been enhanced had I been able to access assistance in transcribing interviews and checking transcripts against audiotapes for accuracy, rather than working alone. By working alone, there may be errors in my transcriptions and therefore not be an accurate representation of the participants' data. Similarly, although committee members reviewed the data and provided guidance, it would have increased reliability had it been possible to have two or more researchers comparing their analysis of the transcripts.

Future Research Directions

Tobacco in the hospitality industry. This study would have benefited from increased representation from women with dependents in order to better understand the influence of social roles (e.g., parenting), therefore a study focusing on women with dependents who serve both smokers and non-smokers is necessary. Findings from this study suggest it would be valuable to explore ways to support smokers in the workplace by assisting their smoking cessation efforts, and to provide awareness to all hospitality workers that the tobacco industry attempts to target those in their age group and in their occupation. This study focused on female servers and thus cannot report on the tobacco use of male servers. In order to understand the underlying issues for all workers, a qualitative study of male servers needs to be conducted to identify possible similarities and dissimilarities related to gender and tobacco use in the hospitality industry. Kitchen staff, a division of hospitality workers, work closely with servers, and may also have issues related to tobacco use. Thus, their perspectives of tobacco use in the hospitality industry also should be studied. I then, would advocate to the hospitality industry, potentially in collaboration with *Work Safe BC* (Workers' Compensation Board of BC),

to conduct a project using the healthy atmosphere policy described above in the *implications for health promotion* section with intervention strategies that support hospitality workers to attain a healthier work environment that encourages smoking reduction/cessation.

Conclusion

This thesis used a qualitative approach to explore young adult women's experiences with health and health behaviour in the hospitality industry. Findings suggest an occupational community exists that marginalizes hospitality workers from the public they serve. Most interestingly, although there has been a public shift from socially promoting tobacco use to shunning it as a negative behaviour, the hospitality industry has continued to support tobacco use among the young adult women they employ. Within this environment, there exists two subgroups of servers, of which, smokers have more control over their work environment than non-smokers. This marginalization of non-smokers is detrimental to both groups by supporting tobacco use and undermining the health of workers. This dynamic exists in an industry that consists of young adults who, based on their current life stage, often make unhealthy choices in the context of a perceived temporary lifestyle. I have introduced potential areas to address this issue focusing on instigating change in the workplace environment and disseminating tobacco industry efforts to workers.

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Appendix A
Recruitment Aid

**AN INVITATION TO PARTICIPATE IN A STUDY EXAMINING WOMENS'
WORK, LIFE AND HEALTH.**

My name is Michelle Smith, and I am a graduate student at the University of Alberta. I have worked as a server for many years in the BC and Alberta hospitality industry. As a result of my years as a server, I decided to conduct my thesis project on experiences of women working as servers and similar types of service work occupations. I am interested in examining womens' work and life and how it may affect their health.

I would like to invite women in service occupations to participate in an interview. The interview will take about 60-90 minutes. I will be providing all participants with \$40.00 as compensation for their time. In order to participate, you must be currently working in a service occupation. I am looking for women who are either smokers or non smokers (have not smoked in the last twelve months).

All information that I gather during the interview will be kept confidential. Your name, or any other identifying features, will not be noted on the research materials and will not appear in any reports of the study. Your participation will contribute to addressing the unique health and lifestyle issues of those in the service industry.

If you would like to participate, please contact me by email: michelle.smith@ualberta.ca or cell phone 250-863-5004. I understand that you may be calling long distance so please feel free to call collect or leave a message and I will return your call.

Thank you,

Michelle Smith
MSc Health Promotion Graduate Student
University of Alberta

Appendix B
Participant Information Letter
Health Promotion for Women in Service Occupations

Purpose: The purpose of this research project is to explore women's experiences as food and beverage servers in the hospitality industry in order to understand how their work interacts with their health.

Methods: I am asking you to talk to me about your experiences as a server in the restaurant industry. There are no right or wrong answers. The interview will last for about 60-90 minutes.

Confidentiality: All information will be held confidential (or private), except when professional codes of ethics or legislation (or the law) requires reporting. The interview will be recorded on tape. I will take the recording of the interview and turn it into text or written words. Your name and any other identifying information in the interview will not be attached to the information you gave. The only people with access to the name of the person on the tape will be Michelle Smith and her supervisor Dr. Cam Wild. Your name will be on the consent form that Dr. Cam Wild sees for the purpose of this study. Your name will not be put on the tape and only Michelle Smith will have access to the tape. At the end of the study, all information will be stored in a locked filing cabinet and kept for five years after the study is finished.

Benefits: This study may or may not have any direct benefits for you. It is hoped that your experiences will help provide a better understanding of the service industry and women's health.

Risks: It is not expected that being in this study will harm you. However, if you have any unpleasant thoughts or feelings after this interview I will direct you toward resources that may help.

Withdrawal from the study: You have the right to withdraw at any point and the interview will stop. You have the right to not answer any question. If at the end of the interview, you do not want your information used it will not be included. You will still receive the \$40.00.

Use of your Information: This study is being done as part of a graduate studies thesis project. Michelle Smith is a student in the Centre for Health Promotion Studies at the University of Alberta. The things that you say in the interviews will be tape recorded, carefully reviewed, and included in her thesis project. Your comments will help to understand what it is like to be a female server in the hospitality industry. You will remain anonymous. Your name will also never be used in any presentations or publications of the study results. You will receive a summary of the results of the project upon completion of the study.

Thank you very much for taking part in this study.

****If you have any concerns about any aspect of this study, you may contact:

Helen M. Madill PhD CPsych, Professor & Graduate Programs Coordinator
Centre for Health Promotion Studies, 5-10 University Extension Centre,
University of Alberta, Edmonton AB T6G 2T4

Phone: (780) 492-8661 Fax: (780) 492-9579 Email: helen.madill@ualberta.ca

Appendix C
Participant Informed Consent

Title of Research Project:

Health Promotion for Women in the Service Occupations

Investigator:

Michelle Smith, MSc Candidate

Centre for Health Promotion Studies, University of Alberta

Consent to participate:

Please circle your answers:

Do you understand that you have been asked to be in a research study?	Yes	No
Have you read and received a copy of the attached Information Sheet?	Yes	No
Do you understand the benefits and risks involved in taking part in this study?	Yes	No
Have you had an opportunity to ask questions and discuss this study?	Yes	No
Do you understand that you can quit taking part in this study at any time?	Yes	No
Has confidentiality been explained to you?	Yes	No
Do you understand that you will remain anonymous?	Yes	No
Do you know that the information that you provide will be used for Michelle Smith's Health Promotion Studies Thesis Project?	Yes	No
Do you agree to have your interview tape-recorded?	Yes	No

If you have any questions or concerns, please contact:

Michelle Smith

Home phone: 250-863-5004 Email: michelle.smith@ualberta.ca

The study was explained to me by: _____ Date (dd/mm/yyyy)

I agree to take part in this study.

Signature of Research Participant

Printed Name

I agree that the person signing this form understands what is involved in the study and voluntarily agrees to participate.

Researcher

Printed Name

Appendix D
Demographics Sheet

Date _____.

Participant # _____.

Age _____.

Marital Status _____.

Number of children caring for (if applicable) _____.

Age of each child _____.

Number of seniors caring for (if applicable) _____.

Number of years/months as a server _____.

Average number of shifts per week _____.

Average number of hours per day _____.

Typical shifts you work per week (Please check all that apply):

_____ Night shift

_____ Day shift

_____ Graveyard shift

What are the lengths of each type of shift you work (if applicable)?

Night shift _____.

Day shift _____.

Graveyard shift _____.

Do you work split shifts (i.e., two shift in a 24 hour period)? Yes No

If so, how may days per week do you work split shifts? _____.

How many service occupation businesses have you worked at in total?

How many service occupation businesses do you work at right now?

Appendix E

Semi-Structured Interview Guide

Introduction and Rapport building

Example briefing: Hi, My name is Michelle Smith. Thank you for your interest in participating in this project. I will be doing the interview with you today. Here is an information sheet that explains the project. Also included is a consent form. Please read the information sheet, and consent form and...if you agree to be interviewed please sign the consent form. Thank you. Before we begin, I would just like to mention again that your participation is voluntary and if you want, we can stop the interview at any time. For the purpose of collecting your information accurately, I will be tape recording the interview. Is this OK with you? Do you have any questions before we start?

Topic: Paid Work

1. I'd like to learn about your experiences in your job... can you tell me what is it like for you to be a
2. What is it like to work in this occupation?
3. Is there anything positive?
4. Is there anything negative?
5. What are your experiences with your co-workers, managers?
6. What are your experiences with customers?
7. What is your work schedule like?
8. Do you like or dislike the hours you work? Can you explain?
9. Do you have more than one job? Are you a student?
10. Overall, do you like this type of work?
11. When you started doing this type of job, did you have expectations about how long you would do it?
12. And now, how long do you plan to continue?

Topic: Unpaid work and caregiving

1. I would like to know now, about what its like to be a server and having a family, can you tell me how your job as a server fits with your home life?
2. Who tends to do the housework and other household chores (i.e., grocery shopping) in your house?
3. Who tends to do the majority of childcare in your house?
4. Do you assist with the care of anyone else (e.g. parent, grandparent, siblings etc)?
5. As a server, do you feel that your job helps you with your other roles and responsibilities at home?
6. What is childcare like for you? What type of childcare do you use when you're at work?
7. What are your experiences with the types of hours you have at work (e.g. shift work) and arranging childcare?
8. In your experience, has work been supportive of you needing to arrange childcare or other issues with your child(ren) (e.g. getting them to school, a child being sick)?
9. If you also care for others, how does your work as a server interact with that?

Topic: Health

1. Can you tell me, overall, how would you consider your general health to be?
2. Is there anything about your job that you would say affects your health, in a good or bad way?
3. How accessible is health care to you? Are there any barriers for you in trying to get health care services? Are you satisfied with your ability to get health care services? Can you explain?
4. Have you ever been injured at your job? Can you explain?

Topic: Stress and coping

1. Would you say stress is a part of your life? If so, in what way?
2. As a, do you consider your job stressful? Why or why not?
3. Can you tell me what else influences stress in your life?
4. Can you tell me how you deal with stress in your life, if anything?

Topic: Health behaviour

For smokers

1. Can you tell me about smoking?
2. How long have you been smoking?
3. When do you tend to smoke?
4. Where do you tend to smoke?
5. Can you tell me why you think you smoke?
6. Do you want to quit? Do you plan to quit?
7. How does smoking fit with your work?
8. Is there anything about smoking that influences your smoking (e.g. to quit or to continue smoking)?
9. Does your family life influence smoking (e.g. to quit or to continue smoking)?
10. What do you like and/or dislike about smoking?
11. Does your work or family life make it easy or difficult to smoke?

For non-smokers

12. Have you ever smoked?
13. If yes, why don't you now?

For smokers/non-smokers

14. Do people around you smoke? Family, friends? Coworkers?
15. In your occupation, what would you consider the most common attitudes around smoking to be? Is it accepted/not accepted? Do you find a lot or only a few smoke at work? Do they smoke at work or outside of work or both?

Final Request for Interpretations

1. Overall, how would you describe your experiences as a woman and in this job with a family?
2. Is there anything else you would like to add?